DOCUMENT RESUME

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ABSTRACT

A review was made of federal activity in school health promotion for the purpose of sharing information to use effectively existing federal activity, to prevent duplication of effort, and to increase interagency cooperation. Surveyed agencies submitted a statement regarding their missions in school health promotion and provided a list of current activities, including information on: (1) sponsoring agency; (2) project title; (3) contact person and telephone number for further information; (4) category (health education, health services, health environment, coordination, or informational); (5) anticipated years of operation; (6) target group; and (7) brief description of activities. Reports were submitted by the Department of Education, the Department of Health and Human Services, and the Department of Transportation. Included in this report from the Department of Education are abstracts of research projects initiated by the National Institute of Education and summaries of projects conducted by the Office of Libraries and Learning Technology. Information is provided on activities of the Public Health Services in the report from the Department of Health and Human Services. The focus of the report from the Department of Transportation is on highway safety and educational activities sponsored by the United States Coast Guard. (JD)

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ED226005

INTERAGENCY MEETING ON HEALTH PROMOTION THROUGH THE SCHOOLS

Inventory of Federal School Health Promotion Activities

Working Document

March 24-25, 1983

U.S. DEPARTMENT OF EDUCATION
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U.S. Department of Education

Coordinated by the Office of Disease Prevention and Health Promotion

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INTRODUCTION

An important Federal strategy in promoting health and preventing disease is the development of an understanding and awareness of influences on health at an early age. School-based programs offer the prospect for enormous impact in this area; however, to achieve this aim, efforts must be made to foster high quality programs and to effectively coordinate the various activities at the national, state, and local levels.

To begin to achieve the kind of coordination necessary to effectively plan and implement health promotion programs through schools at all levels, it is essential that there be an understanding of the Federal Government's role in school health promotion. In response to this need, the Department of Education (DOE) and the Department of Health and Human Services (DHHS) have jointly sponsored a review of Federal activity in school health promotion. This review has been planned and coordinated by a planning committee of representatives from the DOE and DHHS. Members of the planning committee include:

Glen G. Gilbert, Ph.D., Office of Disease Prevention and Health Promotion, Coordinator for the Department of Health and Human Services

Diane Vines, Department of Education, Coordinator for the Department of Education

Margaret Brenner, Department of Education

Roy Davis, Centers for Disease Control

JoAnn Gephart, Maternal and Child Health, Health Resources and Services Administration

Jane Jacobs, National Institutes of Health

Lloyd Kolbe, Ph.D., Office of Disease Prevention and Health Promotion

Marshall Kreuter, Ph.D., Centers for Disease Control

Audrey Manley, M.D., Office of the Administrator, Clinical Affairs, Health Resources and Services Administration

Elaine Stone, Ph.D., National Institutes of Health

Sidney Wolverton, Alcohol, Drug Abuse, and Mental Health Administration

A key component of this review of Federal activity in school health promotion is: an inventory of current Federal agency activities in school health promotion. Each agency surveyed was requested to submit the following information:

1. A brief statement regarding its mission in school health promotion.

2. A list of current activities, including the following information for each project/activity:

   - Sponsoring agency.
   - Project title.
   - Contact person and telephone number for further information.
   - Category (Health Education, Health Services, Healthy Environment, Coordination, or informational).
   - Anticipated years of operation.
   - Target group.
   - Brief description.

Contained here are the results of the inventory as reported by the various Federal agencies surveyed. This working document is designed to serve as a mechanism for: (1) sharing information concerning Federal programs designed to promote good health practices among youth; (2) identifying unnecessary duplication of effort; and (3) identifying opportunities for cooperative planning. It provides a set of working materials which can be updated as additional or revised information from the various agencies becomes available. Agencies with new or additional information are encouraged to submit it to:

Glen G. Gilbert, Ph.D.
Office of Disease Prevention
  and Health Promotion
300 7th Street, S.W., Room 613
Washington, D.C. 20201
(202) 472-5308

Interagency Summary of Health Promotion Activities and the Schools

		Category				Target Group								Years of Operation			
Agency/Activity	**Page**	Health Education	Health Services	School Environment	Coordination	Primary Students	Secondary Students	College Students	Faculty/Staff	Environmental	General Public	Parents	Other	Ongoing	FY 83	FY 84	Other
DEPARTMENT OF EDUCATION	1																
Education Technology Programs	3	●	●			●	●						●				●
Educational Research and Development	23	●											●	●			●
Early Childhood Program for Children with Epilepsy in School Settings	33		●			●										●	
Public Policies Affecting Chronically Ill Children	35	●				●									●		
Chapter I, ECIA (Formerly Title I, ESEA)	37		●		●	●	●		●					●	●	●	
Follow Through Program	41		●			●								●	●		
Migrant Education Program Migrant Student Record Transfer System	46	●	●		●	●	●						●	●	●	●	
Basic State Formula Grant Program	48	●	●		●	●	●						●	●	●	●	
Interstate/Intrastate Coordination Project	50	●			●	●	●		●				●		●		
College Assistance Migrant Program	52				●			●							●		
High School Equivalency Program	54				●								●		●		
Indian Education Programs, OESE	56		●			●	●							●	●		
Chapter II, Education Consolidation and Improvement Act of 1981	58	●	●	●	●	●	●		●				●	●			
Drug and Alcohol Abuse Pilot Program	60	●			●	●	●							●			
National Alcohol and Drug Abuse Education	62	●	●				●							●			
Asbestos School Hazard Detection and Control Act of 1980	64			●		●	●	●	●	●				●			
Asbestos School Hazard Detection Program	66			●						●				●			

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Interagency Summary of Health Promotion Activities and the Schools

		Category				Target Group								Years of Operation			
Agency/Activity	Page	Health Education	Health Services	School Environment	Coordination	Primary Students	Secondary Students	College Students	Faculty/Staff	Environmental	General Public	Parents	Other	Ongoing	FY 83	FY 84	Other
DEPARTMENT OF EDUCATION (Continued)																	
Education Resources and Information Center (ERIC)	68	●						●	●				●	●			
National Diffusion Network	70	●			●	●	●		●					●			
High School and Beyond	89	●					●	●									●
DEPARTMENT OF HEALTH AND HUMAN SERVICES																	
• Office of the Assistant Secretary for Health	93																
National Health Promotion Training Network	94	●	●								●				●	●	
National Health Information Clearinghouse	96	●									●		●			●	
School Health Programs	98	●			●				●		●	●		●			
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National Youth Fitness Study	102	●				●	●								●	●	
Identification of Computer Software in Health Promotion	104	●											●	●			
Voluntary Family Planning Programs	106	●	●				●	●			●	●	●	●			
Adolescent Family Life Demonstration Projects	108	●	●				●					●		●			
Physical Fitness and Sports in Schools	110				●	●	●	●	●		●	●	●	●			
National Survey of Personal Health Practices and Consequences	112	●	●								●	●					●
National Health Interview Survey	114		●			●	●	●			●			●			●
National Health and Nutrition Examination Survey	116	●	●	●		●	●	●			●	●		●			

Interagency Summary of Health Promotion Activities and the Schools

Agency/Activity	Page	Category				Target Group								Years of Operation			
		Health Education	Health Services	School Environment	Coordination	Primary Students	Secondary Students	College Students	Faculty/Staff	Environmental	General Public	Parents	Other	Ongoing	FY 83	FY 84	Other
DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)																	
Public Service Campaign on Smoking and Health	118	●				●	●	●			●			●			
Tobacco, Smoking and Health: A Fact Book	120	●					●	●	●		●						●
"Why People Smoke Cigarettes"	122	●						●	●		●	●	●	●			
Teenage Cigarette Smoking—Self Test	124	●					●							●			
• Alcohol, Drug Abuse, and Mental Health Administration	127																
"Being Friends"--Mental Health Educational Curriculum for 9-12 Year-Olds	129	●				●								●			
Adolescence and Stress--Monograph	131	●							●				●	●			
Adolescent Depression—Information for the TV Industry	133	●							●				●	●			
Plain Talk--Series of Flyers	135	●							●		●	●		●			
Mental Health in the Schools--A Training Curriculum	137	●							●				●			●	
Mental Health Program at a Virginia Public School	139	●					●							●			
Caring About Kids--Series of Booklets	141	●							●		●	●		●			
Whole College Catalog on Drinking	144	●		●				●	●					●			
Alcohol Abuse Prevention in the Schools	146	●				●	●		●		●	●		●			
Pyramid Project--Drug Abuse Prevention Consultation	149	●			●	●	●	●	●	●	●	●	●	●			
Drug Abuse Prevention Research	151	●				●	●	●	●		●	●		●			

Interagency Summary of Health Promotion Activities and the Schools

Agency/Activity	Page	Category				Target Group								Years of Operation			
		Health Education	Health Services	School Environment	Coordination	Primary Students	Secondary Students	College Students	Faculty/Staff	Environmental	General Public	Parents	Other	Ongoing	FY 83	FY 84	Other
DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)																	
• Centers for Disease Control																	
Primary Grades Health Curriculum Project	153	●				●			●					●			
Teenage Health Teaching Modules Project	155	●					●		●			●			●		
Teen Health Risk Appraisal	157	●					●								●	●	●
State and Local Health Education Risk Reduction Programs	162	●	●	●	●	●	●	●	●			●	●	●			●
Collection of Literature and Program Information in Health Education	164	●						●	●				●	●			
Immunization and Other Disease Prevention Programs	166	●			●	●	●		●			●	●				
• Food and Drug Administration	169																
Consumer Education Programs in Various Product Areas	170	●							●		●			●			
• National Institutes of Health	229																
Concepts and Skills for Understanding and Using News From Health Research	231	●					●	●	●					●			
Dissemination of Research Information	234	●							●				●	●			
CV Family Risk is Modifiable	237	●					●					●			●	●	●
Chicago Heart Health Curriculum Program	239	●				●	●			●		●			●	●	●
Coronary Risk Factor Intervention in Childhood	241	●	●			●	●			●		●			●	●	●
School-Based Relaxation to Lower Blood Pressure	243	●					●					●		●	●	●	●
School Health Education Project of the Vermont Lung Center—Smoking	245	●				●											●

Interagency Summary of Health Promotion Activities and the Schools

Agency/Activity	Page	Category				Target Group								Years of Operation			
		Health Education	Health Services	School Environment	Coordination	Primary Students	Secondary Students	College Students	Faculty/Staff	Environmental	General Public	Parents	Other	Ongoing	FY 83	FY 84	Other
DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)																	
Health Education in Self-Management of Childhood Asthma	247	●				●			●					●	●	●	●
Smoking Prevention Training for Youth	249	●				●									●	●	
Smoking Prevention and Youth: Motivational Strategies	251	●				●	●									●	
Primary Prevention of Cancer in Childhood	253	●				●	●										●
Smokeless Tobacco and Nontobacco Smoking Product Use	255	●				●	●								●	●	
Effective Methods for Modifying Smoking Behavior	257	●					●								●		
Smoking Prevention in School Age Populations	259	●				●	●									●	
Environmental Cancer Prevention and Labor Education	261	●						●							●		
Cancer Control Research Units and Science Programs	263	●				●	●								●	●	●
Cancer Communications Network	265	●									●			●			
Students with Cancer: A Resource for the Educator	267	●							●					●			
Help Yourself--Tips for Teenagers With Cancer	269	●					●		●					●			
Smoking Programs for Youth	271	●							●		●	●		●			
The Good Neighbor Program	273	●				●	●		●		●	●		●			
Teaching Primary Grade Students About Fluorides (A Film)	275	●				●								●	●		
Preventing Tooth Decay	277	●	●	●		●	●		●		●	●	●	●			
Jennifer: A Revealing Story of Genital Herpes (A Film)	279	●					●							●			

Interagency Summary of Health Promotion Activities and the Schools

		Category				Target Group								Years of Operation			
Agency/Activity	**Page**	Health Education	Health Services	School Environment	Coordination	Primary Students	Secondary Students	College Students	Faculty/Staff	Environmental	General Public	Parents	Other	Ongoing	FY 83	FY 84	Other
DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)																	
Understanding Aging (A Film)	281	●				●										●	
• Health Care Financing Administration	283																
Early and Periodic Screening, Diagnosis and Treatment (EPSDT), Medicaid	284	●	●		●	●	●						●	●			
DEPARTMENT OF TRANSPORTATION	287																
Alcohol Safety Education	289	●				●	●	●	●					●			
Safety Restraints	291	●			●	●	●	●	●		●	●	●	●			
Pedestrian and Bicyclist Safety	293	●				●	●				●	●	●	●			
Recreational Boating Safety	297	●				●	●	●	●		●			●			

Note: Project/activity summaries for the Health Resources Services Administration and ACTION were not received in time for inclusion in the index.

DEPARTMENT OF AGRICULTURE

Information to be supplied later.

DEPARTMENT OF DEFENSE

Information to be supplied later.

DEPARTMENT OF EDUCATION

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Agency U.S. Department of Education

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The Department's mission in school health promotion is explicit in the area of alcohol and drug abuse education. Health promotion is implicit in other programs administered by the Department and is at the discretion of the grantee in most instances. The mission of the Department includes the following objectives:

1. To assist local and State education agencies in serving educationally disadvantaged students through such legislation as:

    - Chapter I of the Education Consolidation and Improvement Act (ECIA) and Follow Through (Economic Opportunity Act of 1964 as amended by P.L. 95-568); which are targeted to schools serving low income and migrant families;
    - The Education of the Handicapped Act (P.L. 94-142); and
    - The Indian Education Act (P.L. 92-318)

The primary purpose of these programs is to assist schools to improve instructional services; however, at the discretion of the local agency, if students are obstructed from participating in the learning process by nutrition or health problems, and provided that other Federal or State resources are not available, program funds may be used for health and nutrition services. Similarly, health education may be included in the learning objectives of these local programs.

2. To provide leadership in school improvement by:

    - Creation of the Commission on Excellence in Education, a panel appointed to examine the state of education and to make recommendations to improve its quality. Their preliminary report will be available early April 1983.
    - Funding research on teaching and learning and on effective schools;
    - Funding research and demonstration programs in educational technology and media;
    - Disseminating educational research and information through the Education Resources and Information Center (ERIC), the National Diffusion Network (NDN) and the Regional Offices; and

- Validating exemplary projects through the Joint Dissemination Review Panel (JDRP).

All of these activities either include health promotion or have implications for health promotion in the schools.

The Department's Alcohol and Drug Abuse Education Program (P.L. 95-336) provides leadership training for school teams to prepare them to solve their unique problems of substance abuse in their own way.

3. To provide formula grant funds for stimulating educational improvement at State and local levels through:

   - Vocational Education Act of 1963, as amended by P.L. 94-482, under which schools may fund health occupations programs and consumer and homemaking education. Nutrition, safety and other topics related to health education are frequently included in the latter; and

   - Chapter II of the Education Consolidaton and Improvement Act (ECIA); under which Health Education is an authorized activity.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Libraries & Learning Technology (OLLT)

2. Project/Activity Title Education Technology Programs
(see attached summaries of projects)

3. Contact for further information:

Name Dr. Milbrey L. Jones

Title Planning and Budget Officer, OLLT
U.S. Department of Education, Mail Stop 30
Street 400 Maryland Avenue, S.W. (Brown Bldg) 613D)

City Washington State DC Zip Code 20202

Telephone (202) 254-6572

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

___ a. Ongoing
___ b. FY 1983
___ c. FY 1984
X d. Other (describe) Programs funded through 1982. The television and radio programs are available through the source shown on each project description.

9 TV/radio programs (useful for health education in schools)
6 health service projects (community-based)
(Federal funding for these has ceased; we are uncertain of present status of projects.)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
____ c. College Students
____ d. Faculty and staff
____ e. Environmental
X f. Other Adults (describe)

7. Brief description (see attached)

These programs may be taped off the air for educational use without charge. Most of the television programs are available for showing over public, commercial, or cable television. All programs with current broadcast rights are captioned for the hearing impaired.

CONTRACT NO.: 300-79-0720

PROJECT : POWERHOUSE

CONTRACTOR : EDUCATIONAL FILM CENTER
5101-F Backlick Road
P.O. Box 1017
Annandale, Virginia 22003

PROJECT DIRECTOR: Ira Klugerman
PHONE: (703) 750-0560

DURATION : October 1, 1979 to March 30, 1983
FY 1979 AWARD : $ 833,234 (Phase I--Pilots and Curriculum Development)
FY 1980 AWARD : $ 2,686,867 (Phase II and III --Production and Print materials)
TOTAL AWARD : $ 3,520,101

ABSTRACT: POWERHOUSE, an educational television series consisting of 16 half-hour shows focuses on health and nutrition for grades four through six. POWERHOUSE is an action-adventure dramatic series starring young people in a gymnasium renovated as a community center. The POWERHOUSE curriculum emphasizes current health and nutrition education goals:

- responsibility for your own health
- relation between physical and mental health
- need for lifelong health habits
- knowledge of health resources

A teacher/leader guide, a student/viewer guide, and a parent guide supplement the broadcast programs. A national curriculum board composed of experts in child development, education, nutrition, health education, sports and physical fitness, and television broadcasting reviews the development of the project. Parents are represented on the board and the project has a separate youth advisory group.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 245-5833

POWERHOUSE Premiered on PBS on December 12, 1982.

It can be seen currently on Chnnel 26 and channel 32.

Funded under Educational Television and Radio programming,

P.L. 95-561, Title III, Section 303(a)

CONTRACT NO.: 300-73-0551

PROJECT : JACKSON JUNIOR HIGH

CONTRACTOR : EDUCATIONAL FILM CENTER
5101-F Backlick Road
P.O. Box 1017
Annandale, Virginia 22003

PROJECT DIRECTOR: Ira Klugerman
PHONE: (703) 750-0560

CONTRACTOR FOR PRINT MATERIALS - CONTRACT NO.: OEC-0-75-0390
ABT ASSOCIATES
55 Wheeler Street
Cambridge, Massachusetts 02138
PROJECT DIRECTOR: Peter Finn
PHONE: (617) 492-7100

DURATION : FY 1973 - FY 1976
FY 1973 AWARD : $1.3 million for both JACKSON JUNIOR HIGH and DIAL A-L-C-O-H-O-L ($1 Million was transferred to the U.S. Office of Education from NIAAA--National Institute on Alcohol Abuse and ALcoholism.

ABSTRACT: The four 15-minute JACKSON JUNIOR HIGH films for grades five through eight contain objective discussion of facts about alcohol--myths, customs, effects, reasons for use and non-use, problem drinking. There is emphasis on affective issues--peer pressure, risk taking, role modeling, curiosity. The focus is on promoting decision-making skills, not abstinence or learning how to drink.

"THE PARTY'S OVER," one of the JACKSON JUNIOR HIGH films, won the Chris Bronze Plaque at the Columbus Film Festival on October 20, 1977. ROUTE ONE" and "BARBARA MURRAY," also won the CINE GOLDEN EAGLES Award in 1977. Selected by CINE, Council of International Nontheatrical Events, for the Program's excellence and to represent the United States in motion picture festivals abroad.

THE MATERIALS:

16 mm films available for rental or purchase; available on videocassettes for sale only; accompanied by Teacher Guide and Student Booklet; Adult Leader Guide also available for adult audiences; free Teacher Training Maunal appropriate for staff development and teacher training purposes.

All materials may be reproduced for educational use.

VIDEOTAPE OR FILMS AVAILABLE FROM: NATIONAL AUDIOVISUAL CENTER, General Services Administration, Washington, D.C. 20409. PHONE: (301) 763-1896.

PRINT MATERIALS:

- Teacher Manuals for use with JACKSON JUNIOR HIGH - Grades 5-8
  35pp. 85¢

- Student Booklet - KIDS AND ALCOHOL: Facts and Ideas About Drinking and Not Drinking
  20 pp. 55¢

For copies of the Teacher Manuals and Student Booklets, send your purchase order to: (A 20% discount will be given for orders of 2,000 or more copies of the Teacher Manuals and Student Booklets in any combination, 10% discount for orders of 50 or more.)

The National Council on Alcoholism
733 Third Avenue
New York, NY 10017
(212) 986-4433

- Teacher Training in Alcohol Education Using the Two Film Series JACKSON JUNIOR HIGH and DIAL A-L-C-O-H-O-L
  13 pp. Free. Order from:

  NCALI, (National Clearinghouse on Alcohol Information)
  Box 2345
  Rockville, MD 20852
  (301) 468-2600

- Adult Group Leader Guide for Use with JACKSON JUNIOR HIGH and DIAL A-L-C-O-H-O-L
  48 pp. $2.30. 25% off on orders of 100 or more copies.
  Send your purchase order to:

  U.S. Government Printing Office
  Superintendent of Documents
  Washington, D.C. 20402
  Stock Number 017-080-1773-3

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

CONTRACT NO.: 300-73-0551

PROJECT : DIAL A-L-C-O-H-O-L

CONTRACTOR : EDUCATIONAL FILM CENTER
5101-F Backlick Road
P.O. Box 1017
Annandale, Virginia 22003
PROJECT DIRECTOR: Ira Klugerman
Phone: (703) 750-0560

CONTRACTOR FOR PRINT MATERIALS:- CONTRACT NO.: OEC-0-75-0390

ABT ASSOCIATES
55 Wheeler Street
Cambridge, Massachusetts 02138
PROJECT DIRECTOR: Peter Finn
PHONE: (617) 492-7100

DURATION : FY 1973 to FY 1976
FY 1973 AWARD : $1.3 Million for both JACKSON JUNIOR HIGH AND DIAL A-L-C-O-H-O-L ($1 Million was transferred to the U.S. Office of Education from NIAAA---National Institute on Alcohol Abuse and Alcoholism.)

ABSTRACT: The four 30-minute DIAL A-L-C-O-H-O-L films for grades 9 through 12 contain objective discussion of facts about alcohol--myths, customs, effects, reasons for use and non-use and problem drinking. There is emphasis on affective issues--peer pressure, risk taking, role modeling, and curiosity. The focus of the programs is on promoting decision-making skills, not abstinence or learning how to drink.

All materials may be reproduced for educational use.

VIDEOTAPE OR FILMS AVAILABLE FROM: NATIONAL AUDIOVISUAL CENTER, General Services Administration, Washington, D.C. 20409. PHONE: (301) 763-1896.

PRINT MATERIALS:

• Teacher Manual for Use with DIAL A-L-C-O-H-O-L - Grades 9-12, 35 pp.	85¢
• Student Booklet--ALCOHOL: PLEASURES AND PROBLEMS, 23pp.	55¢

For copies of the Teacher Manuals and Students Booklets, send your purchase order to: (a 20% discount will be given for orders of 2,000 or more copies of the Teacher Manuals and Student Booklets in any combination, 10% discount on orders of 50 copies).

The National Council on Alcoholism
733 Third Avenue
New York, NY 10017
(212) 986-4433

- Teacher Training In Alcohol Education Using the Two Film Series JACKSON JUNIOR HIGH and DIAL A-L-C-O-H-O-L
  13 pp. Free. Order from:

  NCALI (National Clearinghouse on Alcohol Information)
  Box 2345
  Rockville, MD 20852
  (301) 468-2600

- Adult Group Leader Guide for Use with JACKSON JUNIOR HIGH and DIAL A-L-C-O-H-O-L
  48pp. $2.30. 25% off on orders of 100 or more copies. Send your purchase order to:

  U.S. Government Printing Office
  Superintendent of Documents
  Washington, D.C. 20402
  Stock Number 017-080-1773-3

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

CONTRACT NO.: 300-80-0812

PROJECT : THE BRIDGE

CONTRACTOR : MONROE PUBLIC RADIO
1014 Monroe Turnpike
Monroe, Connecticut 06468

PROJECT DIRECTOR: Stewart E. Nazzaro, Jr.
PHONE: (203) 268-1159

DURATION : September 1980 to September 1981
FY 1980 AWARD : $28,720

ABSTRACT: THE BRIDGE is a regional radio series of 21 half-hour programs aimed at pre-adolescents and their families. Each program in the series focuses on a different situation of problems common to all young people, such as alcoholism, drug addiction and peer pressure. Blacks, Hispanics and Portuguese ethnic groups participate in the series.

THE BRIDGE is staffed by handicapped professional broadcasters. MONROE is the operator of Southern Connecticut's only public affairs radio station WMNR-FM.

CONTACT. Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Emergency School Assistance Act, P.L. 95-561.
Title VI, Section 611, Childrens's Television and Radio Series.

CONTRACT NO.: OEC-0-73-6296

PROJECT : GETTIN' OVER

CONTRACTOR : EDUCATIONAL FILM CENTER
5101-F Backlick Road
P.O. Box 1017
Annandale, Va 22003

PROJECT CONTACT : Dr. Jack Hunter
PROJECT DIRECTOR: Art Cromwell
PHONE: (703) 750-0560

DURATION : September 1973 to October 1975
FY 1973 AWARD: $1,762,298

ABSTRACT: GETTIN' OVER is a series of 52 half-hour programs for adolescents which stresses practical information and survival skills to help bridge the transition between adolescence and adult responsibilities. Each show focuses on topics of concern and importance to high school students from low-income and poverty-line homes, in particular, but of general interest to all viewers. Topics include consumer skills; prenatal and child care; job hunting and job upgrading; civil and criminal legal rights; and preventive health care and availability of medical services.

GETTIN' OVER is built around a permanent cast of a dozen teenagers who talk, question, argue and investigate. Originally scored rock music is used extensively throughout to set the mood and enhance the pace.

VIDEOTAPE AVAILABLE FROM GREAT PLAINS NATIONAL INSTRUCTIONAL TELEVISION LIBRARY, P.O. Box 80669, Lincoln, Nebraska 68501, PHONE: (402) 472-2007 TOLL FREE NO.: 800-228-4630.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Emergency School Assistanc Act, P.L. 96-561, Title VI, Section 611, Childrens Television and Radio Series.

CONTRACT NO.: 300-76-0038

PROJECT : LA ESQUINA

CONTRACTOR : SOUTHWEST EDUCATIONAL DEVELOPMENT LABORATORY
211 East 7th Street
Austin, Texas 78701

PROJECT CONTACT : James W. Kunetka
PROJECT DIRECTOR: Burleson Williams and Johnny Gutierrez
PHONE: (512) 476-6861

DURATION : September 1975 to December 1976
FY 1976 AWARD: $249,999

ABSTRACT: LA ESQUINA is a series of 10 dramatic half-hour programs intended for adolescent youngsters. Action takes place in a soda shop frequented by Chicano and Anglo teenagers around whose problems the series revolves. The programs are in English, except for typical teenage slang. The "gang" is a lively, crazy bunch, full of humor, warmth and refreshing naivete. The action takes place in LA ESQUINA, but the situations, laced with comedy and drama, center around the "family" as well as the "gang."

The programs seek to reduce the minority isolation of Mexican-American students by positively reinforcing the teenager as an individual, a member of a unique cultural group and a member of a larger complex society.

The headaches and problems confronted by adolescents include dating, drugs, school, politics, discrimination, desegregation, peer acceptance, making decisions, women's roles, cultural pride and militancy. In facing these problems, the students begin to perceive glimmers of maturity and gain valuable experiences, which are readily transmitted to the audience.

VIDEOTAPE AVAILABLE FROM GREAT PLAINS NATIONAL INSTRUCTIONAL TELEVISION LIBRARY, P.O. Box 80669, Lincoln, Nebraska 68501, PHONE: (402) 472-2007
TOLL FREE NO.: 800-228-4630.

CONTACT: Division of Educational Technology (DET)
PHONE (202) 254-5833

Funded under Emergency School Assistance Act,
P.L. 95-561, Title VI, Section 611, Children's
Television and Radio Series

CONTRACT NO.: 300-79-0757

PROJECT : THE NEW AMERICANS

CONTRACTOR : KCET COMMUNITY TELEVISION
4401 Sunset Boulevard
Los Angeles, California 90027

PROJECT DIRECTOR: David Crippens
PHONE: (213) 666-6500

DURATION : September 1979 to October 1980
FY 1979 AWARD: $299,113

ABSTRACT: THE NEW AMERICANS is a series of four half-hour television programs about Indochinese culture and history. Vietnamese, ethnic Chinese from Vietnam, Cambodian, Laotian and the Lao-Hmong from Laos are the cultures explored in this series. The shows are designed to encourage communication, mutual knowledge and respect between Indochinese refugees and their new communities, including schools, social service agencies and health care agencies.

The format for THE NEW AMERICANS series consists of original music, video magic, dramatic vignettes, cultural demonstrations and colorful costumes with lively appearances from Cu Hien, the lovable wizard.

VIDEOTAPE AVAILABLE FROM GREAT PLAINS NATIONAL INSTRUCTIONAL TELEVISION LIBRARY, P.O. Box 80669, Lincoln, Nebraska 68501, PHONE: (402) 472-2007 TOLL FREE NO.: 800-228-4630.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Emergency School Assistance Act, P.L. 95-561, Title VI, Section 611, Children's Television and Radio Series.

CONTRACT NO.: G00-77-C0075

PROJECT : SONRISAS

CONTRACTOR : KLRN-TV
Box 7158
Austin, Texas 78712

PROJECT CONTACT : James A. Ullrich
PROJECT DIRECTOR: Ramon Tanguma
PHONE: (512) 471-4811

DURATION : September 1977 to October 1979
FY 1977 AWARD : $2.1 million

ABSTRACT: The 39 half-hour programs/dramas of SONRISAS (Spanish for "smiles") deal with everyday situations such as death, alcoholism, teenage love and ecology ... and demonstrate how such situations affect Hispanic children and adults in the United States. The episodes of the series concentrate primarily on a group of children's adventures in an urban community center. The cast members are all Hispanic--Cuban-Americans, Puerto Ricans and Mexican-Americans. This series is recommended for youngsters ages 8 through 12.

VIDEOTAPE AVAILABLE FROM GREAT PLAINS NATIONAL INSTRUCTIONAL TELEVISION LIBRARY, P.O. Box 80669, Lincoln, Nebraska 68501, PHONE: (402) 472-2007 TOLL FREE NO.: 800-228-4630.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Emergency School Assistance Act,
P.L. 95-561, Title VI, Section 611, Children's
Television and Radio Series

CONTRACT NO.: G00-77-C 0119

PROJECT : UP AND COMING

CONTRACTOR : KQED-TV
500 Eighth Street
San Francisco, California 94103

PROJECT CONTACT : Nancy Carter
PROJECT DIRECTOR: Avon Kirkland
PHONE: (415) 864-2000

DURATION : 1977 to 1980
FY 1977 AWARD : $2,347,500

ABSTRACT: UP AND COMING is a reality-based series of 15 half-hour dramas depicting contemporary social and emotional dilemmas of teenagers struggling through adolescence. Featuring the Wilsons, an upward-striving Black family, and their three teenage children, the series explores teenagers' handling of problems with personal and family relationships, sex roles, stereotyping, racial conflict, teenage pregnancy, career aspirations, and other issues common to adolescence. The programs combine humor, action and real life drama, and promise to appeal to both general and teenage audiences.

In 1979, the Corporation for Public Broadcasting awarded a grant of $300,000 to KQED-TV for UP AND COMING.

The series received awards from Action for Children's Television, the New York Film Festival, and the National Education Association.

UP AND COMING will be shown with closed captions on most PBS stations in the fall of 1982.

VIDEOTAPE AVAILABLE FROM GREAT PLAINS NATIONAL INSTRUCTIONAL TELEVISION LIBRARY, P.O. Box 80669, Lincoln Nebraska 68501, PHONE: (402) 472-2007 TOLL FREE NO.: 800-228-4630.

PRINT MATERIALS: An educational guide to the 15 programs with discussion questions for classroom use. (14 pp. $1.00 each, bulk order of 25 or over 50¢ each). Order From: Prime Time School Television, 40 East Huron, Chicago, Illinois 60611, PHONE: (312) 787-7600.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Emergency School Assistance Act, P.L. 95-561, Title VI, Section 611, Children's Television and Radio Series.

CONTRACT NO.:
HEW-035A-7801

PROJECT : UHF RADIO/TELEPHONE SERVICE FOR EMERGENCY MEDICAL VEHICLES

GRANTEE. : STATE OF ALABAMA
Telecommunications Division
Alabama Development Office
State Capitol
Montgomery, Alabama 36130

PROJECT DIRECTOR: Mr. Ned Butler
PHONE: (205) 832-5834

[illegible]ATION : January 1978 to September 1979
FY 1977 GRANT : $128,000

ABSTRACT: The State of Alabama designed and installed a radio/telephone system for emergency medical vehicles which enables paramedics to consult with physicians at local hospitals or at distant medical centers via a radio service that interfaces with standard telephone systems. Radio-telephone interface bases are strategically located in each of seven rural counties, and are linked via UHF radio to regional and community hospitals. These bases are also equipped with microprocessors to determine the appropriate channel allocation for each call, and to prevent co-channel interference. In an emergency situation, the paramedic uses a touchtone access device to quickly link up with one of the UHF stations, which routes the incoming radio call to a medical control center by telephone. This system allows the simultaneous transmission of voice and ECG to hospitals, with the pre-programmed microprocessors precluding the need for manned channel coordination and assignment centers. The paramedic also has the capability of simultaneously connecting any third party, or facility, equipped with a standard telephone merely by putting the second party on temporary "hold," and touchtone-dialing the third number from the field location. All three parties can hear and talk in a three-way hookup. The system is currently serving as a model for emergency medical services nationwide.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Telecommunications Demonstration Program, P.L. 95-567, Section 395(a)

CONTRACT NOS.:
HEW-033A-7801
HEW-033A-7901
HEW-033A-8001

PROJECT : SPECIALIZED COMMUNICATION SYSTEM FOR THE HEARING-AND VISUALLY-IMPAIRED, AND FOR HOMEBOUND STUDENTS, USING SUB-CARRIER RADIO, CABLE, MICROWAVE, AND TELEPHONE

GRANTEE : CENTER FOR EXCELLENCE, INC. (CENTEX)
Williamsburg, Virginia 23185

PROJECT DIRECTOR: Mr. John A. Curtis or
Mr. Alan R. Blatecky
PHONE: (804) 229-8541

DURATION : January 1978 to June 1981
FY 1977 GRANT : $ 60,456
FY 1978 GRANT : $ 79,948
FY 1980 GRANT : $101,030
TOTAL : $241,434

ABSTRACT: The purpose of this grant is to provide education, health, social services, and other consumer information to the visually- and hearing-impaired, and the deaf-blind. The elderly, many of whom are sensory-impaired, are a fourth category of the service audience. Temporarily or permanently homebound children also receive educational services from the system.

The project delivers health, education and consumer information, as well as news and entertainment, to specially equipped radios in home and group settings. Information is provided in special formats for the sensory-impaired. The system uses a Subsidiary Communications Authority (SCA) subcarrier channel on commercial radio station WBCI-FM in Williamsburg to reach its clients. The studio signal is relayed from the project to WBCI by telephone and then transmitted from the station to homes and other settings. A major feature of the project has been the development of multiplexing equipment which enables CenTex to provide three different services over one FM subcarrier or CATV channel. Reading services for the visually-impaired, teletype programs for the deaf, and Braille teletype service for the deaf-blind can be transmitted simultaneously to the special audiences for which they are designed. The project also employs the Instructional Television Fixed Service (microwave) to provide two-way communications between schools and homebound students via a mobile communications unit. In the final phase of the project, service will be extended to additional clients in the Hampton Roads metropolitan area via FM and cable.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Telecommunications Demonstration Program, P.L. 95-567, Section 395(a)

CONTRACT NO.:
HEW-039A-7901

PROJECT : CONTINUING MEDICAL EDUCATION AND MEDICAL CONSULTATION SERVICE PROVIDED VIA SLOW-SCAN TELEVISION/CLOSED-CIRCUIT TELEVISION/TELEPHONE

GRANTEE : MEDICAL CARE DEVELOPMENT, INC.
295 Water Street
Augusta, Maine 04330

PROJECT DIRECTOR: Dr. Manu Chatterjee
Interactive Telecommunications System
PHONE: (207) 622-7566

DURATION : December 1978 to June 1981
FY 1978 GRANT : $194,921

ABSTRACT: The purpose of this grant is to involve medical, nursing, and allied health professionals in a poor, rural Maine county, in educational programs that meet their needs for information and peer contact. This will update and improve their professional training and help reduce the sense of isolation that is a major contributing factor to the health manpower shortage in the county.

The grant provides five health care facilities in Aroostook County with interconnection capability via slow-scan television systems, allowing audiovisual communication among them. These will also be interconnected with an existing closed circuit, broadband TV system known as the Central Main Interactive Telecommunications System (CMITS), which links seven medical and educational institutions by interactive television for continuing medical education and consultation.

Telephone circuits will be utilized to allow medical personnel in the five hospitals to converse with program originators in the central portion of the State. Circuits will also transmit slow-scan signals for intra-county conferencing, and will permit slow-scan video interconnection with the CMITS. Such activities will enable Aroostook health professionals to lecture and participate interactively in educational activities within and outside Aroostook County, and will help reduce problems of isolation.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Telecommunications Demonstration Program, P.L. 95-567, Section 395(a)

CONTRACT NO.:
HEW-043A-8001

PROJECT : TELETEXT SYSTEM FOR DELIVERY OF SOCIAL SERVICE INFORMATION

GRANTEE : NEW YORK UNIVERSITY
725 Broadway, 4th Floor
New York, New York 10013

PROJECT DIRECTOR: Ms. Red Burns
PHONE: (212) 598-2852

DURATION : September 1980 to August 1982
FY 1980 GRANT : $151,000

ABSTRACT: The purpose of this grant is to evaluate the public need/demand/acceptance of a teletext information service. It presents an opportunity to help shape the development of this and other home information systems so as to ensure they are beneficial to the health, education, and other social services.

Broadcast teletext is one component of a new class of communications media which utilizes computer-stored information, broadcast/cable/or telephone wire distribution, and text display, on ordinary television sets equipped with decoders. The decoder allows a viewer to select from a stream of print and graphic information being transmitted via an "extra space" (the vertical blanking interval) in a broadcast signal. Public television station WETA-TV, Channel 26, in Northern Virginia, will carry the teletext signal as a part of its regular broadcasts, and viewers with decoders, will have on-demand access to the news, weather, consumer, and other public service information.

The project will focus on user needs and public service applications rather than on the technology. Decoders have been placed in 40 private homes in the Washington, D.C. metropolitan area; 10 more are placed in a variety of public locations such as the Martin Luther King Library and Gallaudet College for the hearing-impaired. Newspapers, libraries, government offices, and consumer organizations currently contribute information for distribution via teletext, and other local sources of public service information will be added in the near future. The project is being undertaken jointly; other sponsors are the Corporation for Public Broadcasting, the National Science Foundation, and the National Telecommunications and Information Administration.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Telecommunications Demonstration Program, P.L. 95-567, Section 395(a)

CONTRACT NO.:
HEW-040A-7901

PROJECT : MICROPROCESSOR/TELEPHONE SYSTEM FOR BLOOD INVENTORY MANAGEMENT

GRANTEE : TRI-STATE RED CROSS BLOOD CENTER
American National Red Cross
P.O. Box 605
Huntington, West Virginia 25710

PROJECT DIRECTOR: Dr. Mabel M. Stevenson
PHONE: (304) 522-0328

DURATION : December 1978 to February 1980
FY 1978 GRANT : $88,925

ABSTRACT: The purpose of the grant is to make more efficient use of blood inventory, reduce outdating of blood, and meet requests for particular types of blood more quickly in the 52 hospitals in West Virginia, Ohio, and Kentucky which are served by the Tri-State Red Cross Blood Center.

The grant will be used for small microprocessor-based data storage devices in each hospital with solid state circuitry protected by battery hookup in case of power failure. Each device will also have the capability of automatically answering a call from the Regional Blood Center in Huntington and sending information over the telephone to this central data bank.

Equipment at the Huntington Center will consist of a microprocessor-based device to log all the transactions, a video terminal, and an online printer. The central system and the 52 hospitals will be linked by one-way WATS telephone lines using measured time. The operator at the Center will be able to retrieve information from all 52 hospitals automatically or simply access any one of the remote locations and obtain the blood inventory or blood order data.

Each of the 52 hospitals will be required to update daily their blood inventories and orders by blood type and number. This data will be used by the Regional Blood Center for daily decisions on blood distribution. Using the line printer, data may also be stored for analysis at a later time.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Telecommunications Demonstration Program, P.L. 95-567, Section 395(a)

CONTRACT NOS.:
HEW-041A-7901
HEW-041A-8001

PROJECT : **ON-REQUEST MEDICAL INFORMATION VIA SLOW-SCAN TV/TELEPHONE**

GRANTEE : UNIVERSITY OF CINCINNATI
231 Bethesda Avenue
Cincinnati, Ohio 45267

PROJECT DIRECTOR: Ms. Nancy Lorenzi
Director, Medical Center Libraries
PHONE: (513) 872-5651

DURATION : December 1978 to April 1981
FY 1978 GRANT : $105,453
FY 1980 GRANT : $100,096
TOTAL : $205,549

ABSTRACT: The purpose of this grant is to provide doctors, pharmacists, and other health professionals in two rural, one suburban, and one urban hospital with the opportunity to request specific medical information from a major medical center. Questions are answered by medical librarians in the Resource Room of the Health Sciences Library, by staff in the Drug and Poison Information Center, and by consultation with any specialist in the Medical Center.

The project uses slow-scan television with interactive audio located at one or two of the following sites--a patient care area, the library, and/or the pharmacy--in each of the four hospitals. Sites at two of the hospitals also have equipment to produce "hard copy." These are linked by telephone with the University of Cincinnati Medical Center.

There are transmission sites in the Health Sciences Library and in the Drug and Poison Information Center. From these two points, resources ranging from literature to consultation with experts can be made available to the remote hospitals. A television monitor and telephone patching device in the resource room of the library allow a specialist in the Medical Center to see what is transmitted from either site and to participate in a three-way conversation including the specialist, health professional inquiring from the remote hospital, and the librarian or pharmacist on the project staff.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Telecommunication Demonstration Program, P.L. 95-567, Section 395(a).

CONTRACT NO.:
HEW-034A-7801

PROJECT : MICROWAVE/CABLE/CLOSED-CIRCUIT TELEVISION SYSTEM FOR PATIENTS IN A STATE HOSPITAL

GRANTEE : WERNERSVILLE STATE HOSPITAL
Wernersville, Pennsylvania 19565

PROJECT DIRECTOR: Dr. Ronald A. Ivison
PHONE: (215) 678-3411, x220

DURATION : January 1978 to January 1980
FY 1977 GRANT : $64,410

ABSTRACT: This project established an interactive microwave telecommunications link between Wernersville Hospital and the Berks County (Reading, Pennsylvania) cable television system. It also installed a closed-circuit television system at the hospital to facilitate patient activities. The intent is to share and integrate resources and services between the hospital and the community-at-large. The hospital believes that programs originating from the hospital provide the local community with a more realistic image of a state hospital, and programs coming to the hospital from community sources offer expanded opportunities for patient education and psychiatric rehabilitation services. In the sense that interactive television can expand one's life space, it provides the Wernersville State Hospital resident with the mobility to experience being part of the mainstream of community life.

The project successfully accomplished its objectives with a daily program schedule that provides in-house programs, community television, or educational programming by satellite from the Appalachian Community Services Network. These sources enable the hospital to provide therapeutic activity, patient education, and staff development programs over the system. Facilities are used for in-house productions and are also shared with other community groups such as high schools and organizations for the elderly.

CONTACT: Division of Educational Technology (DET)
PHONE : (202) 254-5833

Funded under Telecommunications Demonstration Program, P.L. 95-567, Section 395(a).

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute of Education

2. Project/Activity Title Educational Research and Development

3. Contact for further information:

Name Ola Clarke

Title Education Research Specialist

Street 1200 19th Street

City Washington State D.C. Zip Code 20208

Telephone (202) 254-5740

4. Category

X a. Health Education (Information, Curriculum etc.)
____ b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination
x e. Dissemination of education research and development findings and/or research products.

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
x d. Other ~~Occasional research~~ awards which involve health-related issues and/or policies.
(describe)

6. **Target Group**

_____ a. **Primary Grade Students**
_____ b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**
_____ e. **Environmental**
__x__ f. **Other** varies
(describe)

7. **Brief description**

The National Institute of Education supports research and development projects in the field of education and improved dissemination of the results of, and knowledge gained from educational R & D.

Examples of NIE-supported projects which have involved consideration of healthy school environment or health-related policy issues follow:

- Studies on crime and fear of crime in secondary schools, as well as conduct problems and class management techniques. (An annotated list is attached.)
- Studies in the mid- and late 1970's on educational policy regarding teen-aged smoking, adolescent pregnancy and more recently, on service delivery systems through the schools.
- A study of families that work, which included data on both the health and medical benefits and maternity benefits and leaves in its review of the literature of employer responses to family responsibilities of employees. (Copy of _Families that Work: Children in a Changing World_ attached.)

The ERIC Clearinghouse on Teacher Education is responsible for the collection of documents and dissemination of educational information on the full range of topics regarding the teaching and learning process, including health education. The Clearinghouse is equipped to do extensive searches and bibliographies in that area. A Clearinghouse health education Fact Sheet, _Health in the School_, will be published in late February. Inquiries may be made to ERIC Clearinghouse on Teacher Education, One Dupont Circle, N. W., Suite 610, Washington, D.C. 20036, (202) 293-2450.

RESEARCH ACTIVITIES RELATED TO SCHOOL VIOLENCE AND DISRUPTION: 1975-82

Supported by
The National Institute of Education
Washington, D.C. 20208

Of increasing concern to educators and the public are the problems associated with school crime and disruption. Little classroom learning can take place in schools fraught with disruption, personal violence and preoccupation with personal safety. Dollar costs due to vandalism approached $200 million per year in 1976 in repair and replacement of equipment and facilities, and no doubt are higher now. This does not take into account the cost in disruption of learning which occurs as a result of such behaviors in school.

In order to respond to this concern, the National Institute of Education (NIE) has undertaken a range of research activities since 1975. This paper summarizes completed studies and notes how copies may be obtained.* Those from NIE are free of charge.

The largest and most comprehensive NIE research was the Safe School Study, a national survey on levels and locations of school crime and what schools are doing to prevent it. The Study was mandated by the Congress as part of the Education Amendments of 1974 (Public Law 93-380). Several volumes on the Study are summarized below. This compilation contains several sections in the following order:

Overviews of the Area
The Safe School Study and its Offshoots
Management Strategies
Suspension and Alternatives to Suspension
Alternative Schools

Unless otherwise indicated, copies and further information on the studies cited may be obtained by contacting:

Oliver Moles
Teaching and Learning Program
National Institute of Education
Washington, D.C. 20208
Phone: 202-254-~~5706~~
5407

He was head of the NIE School Social Relations Staff from 1976 until it was dissolved in 1978. Most of the projects were begun in that unit at that time.

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* Many of the study summaries are taken from the Educational Resources Information Clearinghouse (ERIC) system. The ED number before such titles is a key to microfiche copies of the complete articles on file with institutions which have the ERIC collection.

OVERVIEWS OF THE AREA

ED165253
Behavior Problems in Secondary Schools.
Feldhusen, John F. **Purdue University.**
Oct 1978 29p.

This paper reviews the problems of antisocial student behavior in schools, tries to identify causes, and examines programs and procedures for remediating and preventing such behavior. This review focuses particularly on senior and junior high schools and all forms of antisocial, aggressive, disruptive behaviors that interfere with school functioning. The report concludes that the problems of school discipline, violence, crime, vandalism, and truancy have grown to large proportions in many American schools. Principals and school boards often seem reluctant to admit the problems that begin or are caused by forces outside the school. Poor home conditions, television violence, a climate of crime in the community, gangs, and peer crime influences are all initial contributors to the problems that surface in schools. But, the author contends, the school also contributes with poor teaching, a negative school climate, a dose of failure for many students, and irrelevant curricula. The school can take positive action along with other youth agencies to alleviate the problem and even create a positive social and academic climate in which all youth can succeed. A set of recommendations for action by educators is presented. (Author)

ED160710
School Crime and Disruption: Prevention Models.
Responsible Action, Inc., Davis, Calif.
Jun 1978 197p.

The focus in this anthology is on practical approaches to school crime prevention and control. The collection begins with two papers describing approaches to the study of crime in schools. One of these outlines a strategy for basing prevention programs on the findings of research tailored to a particular school, while the other offers a conceptual framework for studying school crime and taking appropriate actions to prevent it. These papers are followed by a group of articles which are primarily explanatory, suggesting current theories of causation, but which also offer concrete suggestions for altering conditions in school or society which contribute to school crime. Some of the areas discussed in this section include negative school experiences and low self-esteem, aesthetics of vandalism, the lack of meaningful roles for youth in contemporary society, labeling, and the structural and control theories of delinquency. The third category of papers differs from the second primarily in emphasis. While drawing on various theories of crime causation, these papers concentrate on specific programs or actions which can be taken to reduce school crime. Topics dealt with in this section include racial discrimination, student alienation, selection of school board members, school size, training of specialists, cross-age child care, community involvement, and moral education. (Author/EB)

ED149466
Violent Schools--Safe Schools. The Safe School Study Report to the Congress. Executive Summary.
National Inst. of Education (DHEW), Washington, D.C.
Dec 1977 13p.; For related documents, see below.

A 12-page summary of the Safe School Study outlines the methodology of the study, seriousness of the problem, extent of the problem, location of offenses, factors associated with school violence and vandalism, and the effectiveness of measures taken to prevent crime in schools. (MLF)

Copies available from NIE. For the Safe School Study Executive Summary and School Crime and Disruption call the NIE Public Affairs Office at 202-254-5800. Only a few copies of the latter are left; it is also available from Superintendent of Documents, U.S.Government Printing Office, Washington, D.C. 20402. Orders for multiple copies of the Executive Summary can be filled if needed.

THE SAFE SCHOOL STUDY AND ITS OFFSHOOTS

ED149464
Violent Schools--Safe Schools. The Safe School Study Report to the Congress. Volume 1.
National Inst. of Education (DHEW), Washington, D.C.
Jan 1978 357p.;

The Safe School Study was mandated by Congress to determine the frequency, seriousness, and incidence of crime in elementary and secondary schools in all regions of the United States; the cost of material replacement and repair; the means used in attempting to prevent crimes in schools; and means by which more effective crime prevention may be achieved. The study is based on a mail survey of over 4,000 schools and an onsite survey of 642 schools, and case studies of 10 schools. Among the findings are that about eight percent of the nation's schools have a serious problem with crime; over 25 percent of all schools are subject to vandalism in a given month; and the annual cost of school crime is estimated to be around $200 million. Security devices and security personnel are considered effective in reducing crime, although more emphasis on personnel training is needed. In the case studies, the single most important difference between safe schools and violent schools was found to be a strong, dedicated principal who served as a role model for both students and teachers, and who instituted a firm, fair, and consistent system of discipline. (Author/MLF)

Copies available from NIE Public Affairs Office by calling 202-254-5800.

Safe School Study; Volume 2, Methodology.
National Inst. of Education (DHEW), Washington, D.C.
Dec. 1977 489p.

This volume describes the sample design, data collection instruments and procedures, and data analysis methods used in the Safe School Study. It also contains the data collection instruments, a literature review which preceded the study and other supplementary materials and study procedures.

Copies available from NIE Public Affairs Office by calling 202-254-5800.

Safe School Study; Volume 3, Data Files Documentation.
National Inst. of Education (DHEW), Washington, D.C.
Feb. 1978 438p.

This volume provides information about data files used in the Safe School Study on school crime, including physical description of the data tape and its files, record layout information, special coding techniques, anomalies and problems within the data, advice on analyzing the data, and guidelines for merging and aggregating.

Copies available from NIE Public Affairs Office by calling 202-254-5800.

The Chicago Safe School Study
Center for Urban Education, Board of Education, City of Chicago
Aug. 1981 232p.

This study was modeled after the NIE Safe School Study. Findings show that the Chicago victimization rates for both students and teachers are below national averages for cities over 250,000 population as determined by the NIE study. Consistent with the NIE study, Chicago student, teacher and principal respondents all recommended a firm and consistent disciplinary policy more often than anything else as the best way to deal with the problems of crime and violence in the Chicago schools.

Limited copies available from NIE. A guide entitled Conducting a Victimization Study in Your School District was also developed by the project and is available from NIE.

ED201058
Student Fear in Secondary Schools.
Wayne, Ivor; Rubel, Robert J.
National Graduate Univ., Arlington, Va.; Southwest Texas State Univ., San Marcos. Inst. of Criminal Justice Studies.
Nov 1980 85p.

Based on data from the Safe School Study conducted by the National Institute of Education, this report focuses on how students are affected by their perceptions of danger or threatening situations at school. A review of major research studies on student fear provides the theoretical framework for a discussion of the most probable victims of fear, the conditions or events to which fear is related, and the side-effects of fear. Fearful students are more likely to have few friends, less parental support, lower grades, and a lower self-perception of their reading ability than unfearful students. Four primary factors influencing a student's level of fear in school are the student's grade level, the location of the school, recent victimization of the pupil while at school, and crime in the immediate neighborhood. Apprehensiveness among students reduces concentration on assigned tasks and creates an atmosphere of mistrust. A crime reduction program or an improvement program in education, public relations, and school spirit can help to reduce fear. Suggestions for further research include use of interviews and observations to enrich the data base, refinement of the measures of apprehensiveness, delineation of antecedents and consequences of fear, and the study of schools' responses to climates of fear. (Author/WD)

A revised version appears in The Urban Review, Fall 1982.

OFFSHOOTS OF THE NIE SAFE SCHOOL STUDY

ED183701
Disruption in Six Hundred Schools.
Gottfredson, Gary D.; Daiger, Denise C.
Johns Hopkins Univ., Baltimore, Md. Center for Social Organization of Schools.
Nov 1979 262p.;

Rates of teacher and student victimization are examined in a sample of over 600 public junior and senior high schools using questionnaire data from teachers, students, and principals, and 1970 census data about the communities within which the schools are located. Factor analysis was used to guide the development of scales measuring community and school characteristics. A path model was used to structure the application of statistical controls in assessing the contributions of school characteristics to the explanation of victimization rates. Results imply that rates of teacher victimization are strongly tied to the degree of poverty and unemployment in the surrounding community, and are high in urban areas. Student victimization rates are more independent of community characteristics. Even after statistical controls for community characteristics and the social and demographic composition of the school are applied, a number of school characteristics are moderately associated with victimization rates. These include the ways rules are administered, and the degree of cooperation between administration and teachers. Implications of the research are spelled out in nontechnical language in a final chapter which may be read by readers interested only in an overview of the major findings. (Author)

For copies contact the authors.

ED206702
Measuring Victimization and the Explanation of School Disruption.
Gottfredson, Gary D.; And Others
Johns Hopkins Univ., Baltimore, Md. Center for Social Organization of Schools.
Mar 1981 109p.

Reports by students and teachers of their experiences of personal victimization are used to examine the meaning and distribution of rates of victimization in a national sample of 642 public junior and senior high schools. This research integrates data from questionnaire responses by the schools' principals, teachers, and students; student interviews; and information about the community in which the school is located derived from the 1970 census. Data characterizing schools are used to examine correlates of various kinds of victimization in schools. Results imply that victimization is best regarded as multidimensional, and that different dimensions have different sources. Victimization reports by black and white teachers and students, and male and female students, appear to measure different phenomena which are linked to different school and community characteristics. Affluence and the schools' academic orientation are positively related to teachers' reports of victimization, but negatively related to students' reports. The soundness of a school's administration is negatively related to teacher and black student victimization rates. This research accords with earlier research, implying that school administrative practices contribute to the levels of disruption schools experience, despite individual and community influences on school disruption. (Author/GK)

For copies contact the authors.

Classroom Organization and Management

Jere Brophy. Inst. for Research on Teaching, Michigan State U.
1982 76p.

This paper was prepared for an NIE conference on the implications of research on teaching for practice held in Feb. 1982. Research is reviewed and principles extracted from studies of the last 10-15 years on how successful teachers organize and manage their classrooms including the important topic of getting off to a good start of the school year. Group management techniques from behavior modification and counseling approaches are also treated, as are contextual differences. Key studies are abstracted.

Copies available from NIE.

School Discipline: A Socially Literate Solution

Alfred S. Alschuler. Univ. of Massachusetts
1980. McGraw-Hill Book Co., New York. 215p.

This book describes an approach to discipline problems which does not blame either students or school staff, but rather looks to the system of school rules and relationships for the cause and the place to attempt change. Becoming perceptive or literate of these patterns of conflict which are often not stated is the first task. The second task is analyzing systemic causes prior to changing the system democratically and by mutual agreement. Book also contains exercises.

A summary of the book chapters and the overall approach is available from NIE.

Academic Failure, Student Social Conflict, and Delinquent Behavior

William T. Pink. Univ. of Nebraska-Omaha
1980 59p.

This paper reviews key literature from several disciplinary and theoretical perspectives in exploring the relationship between various forms of academic failure in schools and a range of critical student attitudes and behaviors. It is argued that both the process of schooling and its underlying assumptions serve to create negative student attitudes and anti-social behaviors. The seeming conflict between survey and ethnographic data on the impact of academic failure is discussed, as are the ways differing data-gathering strategies might be combined to produce a more complete view of the everyday process and outcomes of schooling.

A revised version appears in The Urban Review, Fall 1982.

ED176378

An Analysis of Studies on Effectiveness of Training and Staffing to Help Schools Manage Student Conflict and Alienation. A Report.

Hyman, Irwin A.
Temple Univ., Philadelphia, Pa. National Center for the Study of Corporal Punishment and Alternatives in the Schools.
15 Jan 1979 305p.;

A search of the literature was made on the effectiveness of recruitment and selection procedures for identifying and retaining administrators and school staff who are effective in managing student conflict and alienation. A classification scheme devised to fit approaches to school discipline within a theoretical framework includes (1) the psychodynamic-interpersonal model, (2) the behavioral model, (3) the sociological model, (4) the eclectic-ecological model, and (5) the human potential model. At least one approach within each model was reviewed. In the first section of the report, each model is explained and available research studies are cited. The limitations of the research and application of the model are discussed followed by a bibliography. The next section contains summaries of selected programs from 52 of the largest city districts. The concluding section discusses the lack of data on both the inservice training of school administrators and the area of problems of recruitment, selection, and retention of school staff who can manage student conflict and alienation. The report concludes with a summary of the findings, methodological problems, and suggestions for further research. (MLF)

For copies contact the author. Summary available from NIE.
An extension of this study which explores the use of 38 teaching strategies and processes in staff development programs can be found in The Urban Review, Fall 1982. Co-authored with Dolores Lally.

ED144185
Proceedings: Conference on Corporal Punishment in the Schools: A National Debate (Washington, D. C., February 18-20, 1977).
Wise, James H., Ed.
Children's Hospital of the District of Columbia, Washington, D.C.
Feb 1977 59p.;

The conference from which these papers were taken was designed to present a balanced cross-section of opinion on the controversial subject of corporal punishment in the school. The papers contained in this volume include a review of the research on the effects of punishment, an analysis of state legislation regulating corporal punishment in the schools, as well as papers for and against the use of corporal punishment. Special attention is given to the U.S. Supreme Court's decision in the Ingraham v. Wright case, in which the Court ruled that corporal punishment does not violate student's Eighth Amendment rights (fredeom from cruel and unusual punishment) nor require due process before it is applied to students. The volume concludes with an open forum dialogue among representatives of the American Federation of Teachers, the American Psychological Association, and the National Parent Teacher Association. (DS)

Limited copies available from NIE.

ED172309
"Is That Really Fair?"
Lincoln, William F., Ed.; Enos, Sandra L., Ed.
National Inst. of Education (DHEW), Washington, D.C.
15 Apr 1978 294p.

Adequate grievance procedures for use by students are still relatively uncommon in public schools. A survey of a limited number of specialists in student grievance processes, designed to indicate the range of thinking in the field rather than to find a consensus, showed general agreement that due process and legitimate grievance channels are needed, but revealed a variety of opinions concerning grievability, outside review, student and parent participation, and implementation strategy. Robert McKay claims that adequate grievance procedures could alleviate the adversary relationship growing between students and schools. Paul Alphen discusses the concerns and roles of boards of education in grievance policies, including implementation and the effects of such policies on teacher contracts, program costs, and costs of court litigation. William Clifton argues that it is the state's duty to develop effective statewide grievance policies and oversee their application. Staff members from the Center for Community Justice analyzed six grievance processes used in junior and senior high schools and found all lacking. They recommend seven specific elements for inclusion in grievance procedures. Daniel Monti and James Laue discuss the failure of a court-approved grievance process in a Missouri district undergoing desegregation. Donald Murphy enumerates implementation strategies and tactics. (Author/PGD)

ED158372
Strategy Development for Managing Selected Educational Conflicts. A Conceptual Report Related to Conflict and Its Management in the Areas of Student-Student, Student-School, and School-Community Relations.

Francis M. Trusty. Univ. of Tennessee, Knoxville, TN
Mar. 1978 132p.

Managing educational conflict has become increasingly more complex. The purpose of this study was to identify three areas of educational conflict and suggest strategies for managing such conflict. These areas are student-student conflict, student-school conflict, and school-community conflict. Data were collected through interviews with people who have specialized knowledge about conflict. The data did not produce formal conclusions but rather is meant to be the point of departure for focused research efforts. Chapter 1 discusses the role and function of conflict in the larger society and in education. Subsequent chapters each introduce an area of conflict and discuss (1) assumptions related to it, (2) forms of undesirable conflict in that area, (3) sources of and reasons for conflict, (4) suggested strategies for handling conflict, and (5) potential effectiveness of the suggested strategies. Strategies for managing student conflict include such techniques as problem-solving, fact-finding, confrontation, and mediation. Strategies for managing student-school conflict include reeducating faculty and administrators, developing strategies to deal with potential conflicts and modifying educational goals and practices. Managing school-community conflicts involves communication, citizen involvement, public meetings, mediators, judicial proceedings, and, in some cases, force. (Author/JM)

For copies contact the author

Student Suspension: A Critical Reappraisal
Shi-Chang Wu and others. 1980. 30p.

This study uses data from the Safe School Study to examine correlates of suspension among secondary school students. Student attitudes and behaviors are important contributory factors, but not the only ones determining whether students report having been suspended from their school. Holding constant student attitudes and behavior, classroom and school factors also prove to be related. These include teacher perceptions of students as incapable of solving problems, student perceptions that teachers are not interested in them, inconsistent and unfair discipline and academic and racial bias in the schools. The school factors are more powerful than the individual factors in explaining suspension.

A revised version appears in The Urban Review, Winter 1982.

ED173951
In-School Alternatives to Suspension: Conference Report.
Garibaldi, Antoine M., Ed.
National Inst. of Education (DHEW), Washington, D.C.
Apr 1979 174p.

In April 1978 the National Institute of Education held a conference to explore alternative approaches to suspension as a disciplinary procedure. This publication reproduces the proceedings of this conference. The proceedings reflect a cross-section of opinion on alternative programs provided by panelists and speakers from many sectors of the educational community. Highlighted were such considerations as legal issues in the discipline process, effective implementation and organization of programs, and the status of discipline in public education. A presentation by Junious Williams detailed the pros and cons of alternative programs, as well as presenting recent figures on suspension and expulsion in the nation's schools. Hayes Mizell offered a discussion on components essential to implementation of inschool alternative programs. Eight directors of inschool alternative programs presented detailed descriptions of their alternative plans. The Honorable Shirley Chisholm delivered a keynote address proposing a policy among federal agencies promoting the design of more alternative education and employment programs for youth. (Author/JM)

Copies available from NIE Public Affairs Office by calling 202-254-5800.

In-School Alternatives to Suspension: A Description of Ten School District Programs
Richard B. Chobot and Antoine Garibaldi
JWK International Corp. and National Inst. of Education
1982, 33p.

This project examined in-house short term programs functioning in lieu of out-of-school suspension. The purpose of the study was to describe program history, philosophy and goals, organisational structure, operations including staffing and referral procedures, financing and other external supports. A number of conclusions are drawn. The principal's acceptance of the program is seen as a key to its success. Parents also prefer it to out-of-school placement.

Available from NIE. Also appears in The Urban Review, Winter 1982.

Directory of In-School Alternatives to Suspension
Sondra Cooney and others. JWK International Corp.
Sept. 1981 121p.

These are short descriptions of almost 100 programs culled from nationwide contacts. Each entry describes the program, names a contact person, lists student, staff and facility information and key program descriptors. Program types include alternative schools, counseling services, in-school suspension centers, ombudspersons, and time-out rooms. The directory is organised by state and indexed by program type and program activities such as academic services, nondirective and peer counseling, and work-centered activities.

Limited copies are available from NIE.

ALTERNATIVE SCHOOLS FOR DISRUPTIVE YOUTHS

ED162413
Alternative Schools for Disruptive Youth.
Arnove, Robert F.; Strout, Toby
[1978 70p.

This paper analyzes the uses and misuses of alternative education programs for disruptive youth. It discusses their potential for assisting students who are unsuccessful in conventional school programs and points out their limitations and dangers. The paper describes the positive and negative aspects of existing alternative schools. It reviews what research indicates about the impact of alternatives, indicates lacunae in existing research, and suggests areas for further study. Four alternative programs are presented in detail. In a concluding section, the paper discusses a set of conditions that contribute to the success of alternative programs. (Author)

Limited copies available from NIE.

ED208275
Alternative Schools for Disruptive Secondary Students: Testing a Theory of School Processes, Students' Responses, and Outcome Behaviors. Executive Summary.
Mann, David W.; Gold, Martin
Michigan Univ., Ann Arbor. Inst. for Social Research.
Jun 1981 18p.

The research summarized in this report is a longitudinal study of the effectiveness of a particular type of alternative secondary school in improving the behavior of delinquent and disruptive students. Three alternative school programs which provide students with experiences of success and social support from teachers are described. The effectiveness of scholastic success and social support in raising students' self-esteem, integrating students with their school, and decreasing incidents of delinquency and disruption is examined. Details about the students and the alternative schools are described and the study design comparing alternative and conventional students is explained. Findings are given and comparisons among the alternative programs are made. Conclusions in this report indicate that poor scholastic experiences are significant causes of delinquent and disruptive behavior, and positive scholastic experiences make a difference in the behavior of only those students whose delinquency seems effective in defending against negative impacts. Problems of anxious or depressed students are also considered. (NRB)

Limited copies available from NIE. Also appears in The Urban Review, Winter 1982.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education -- Special Education Programs

2. Project/Activity Title Early Childhood Program -- Demonstration of Educational and Related Services for Children with Epilepsy in Public School Settings

3. Contact for further information:

Name Robert Shook

Title Project Director

Street Good Samaritan Hospital

City Portland State Oregon Zip Code 97210

Telephone (503) 229-7217

4. Category

____ a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination

5. Anticipated years of operation

____ a. Ongoing
____ b. FY 1983
X c. FY 1984
____ d. Other ____ (describe)

6. Target Group

__X__ a. **Primary Grade Students**
_____ b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**
_____ e. Environmental
_____ f. Other ________________
(describe)

7. Brief description

School-based development of a manual for public school teachers, psychologists, administrators, nurses and parents concerning children with epilepsy. The Epilepsy Foundation has expressed interest in using this material to update the School Alert materials and in disseminating information about it.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. **Agency** U.S. Department of Education -- Special Education Programs

2. **Project/Activity Title** Early Childhood Program -- Public Policies Affecting Chronically Ill Children

3. **Contact for further information:**

Name Dr. James Perrin, M.D., Vanderbilt Inst. for Public Policy States

Title Project Director

Street 1208 18th Avenue, So.

City Nashville **State** Tennesee **Zip Code** 37212

Telephone (615) 322-8505

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

___ a. Ongoing
X b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. **Target Group**

__X__ a. **Primary Grade Students**
_____ b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**
_____ e. Environmental
_____ f. Other ____________________ (describe)

7. **Brief description**

The project is investigating 11 diseases and disorders to see the effects on children and families; needs; existing public programs affecting these children, private sector organization programs and will develop specifications for a national policy responsive to the needs. A book providing state of the needs, services and policy recommendations will be a product.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education

2. Project/Activity Title Chapter 1, ECIA
(Formerly Title I, ESEA)

3. Contact for further information:

Name Dr. John F. Staehle

Title Acting Director, Compensatory Education Programs

Street 400 Maryland Avenue, S.W., Room 3616, ROB #3

City Washington State D.C. Zip Code 20202

Telephone (202) 245-3081

4. Category

a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
X b. FY 1983
X c. FY 1984
d. Other ____________
(describe)

6. **Target Group**

X a. Primary Grade Students
X b. Secondary Students
____ c. College Students
x d. Faculty and staff
____ e. Environmental
____ f. Other K-21/parents (describe)

7. **Brief description**

Chapter 1 of the Education Consolidation and Improvement Act of 1981 (ECIA) replaced Title I, ESEA beginning with the 1982-83 school year. Chapter 1 has the same general provisions as Title I. Chapter 1 of ECIA authorized Federal assistance for projects designed to meet the special educational needs of children who reside in low-income areas. Funds are allocated, on a formula basis, to local educational agencies (LEAs) through their State educational agency (SEA). The LEA develops the project proposal and submits it for approval to the SEA which is responsible for insuring that the project is planned and operated in accordance with the requirements of the legislation.

The amount of funds available for Chapter 1 for the 1982-83 school year is $3.034 billion. Of this figure, $2.563 billion is used to support Chapter 1 projects in local school districts. The program represents over 20% of the Federal educational budget.

Local school districts are required to use Chapter 1 funds to provide compensatory services to the lowest achieving students. Most projects teach basic skills; 82% teach reading, and 34% math skills. For the school year 1979-80, 78% of the funds were used to support projects for students in Pre-K through grade six; 22% were used for projects serving students in grades 7 through 12. The program provides supplemental educational services each year to approximately 5 million students age 5 through 17 in 14,000 school districts.

While the Chapter 1 statute does not specifically address the issue of support services deemed necessary to improve educational achievement, such as health-related services, local school systems can request such use of funds in their project applications which are submitted to the states for approval. The states develop their policies for handling this program element.

Title I, ESEA*
1979-80 School Year

	Public	Non-Public	Total
Total Children in the Program	5,170,935	192,994	5,363,929**
Health-related Services Provided:			
Health, nutrition	1,504,674	12,464	1,518,798
Attendance, Social Work, Guidance, Psychology	767,845	16,755	792,615
Staff Providing Supporting Services, including Health-related Services			6,304
Other Staff			
Administrative Staff		6,312	
Teachers		78,495	
Teacher Aides		91,456	

Data Source:
Title I Program Directive INST. A310.9, January 29, 1981
Program Directive INST. A310.12, February 18, 1982

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*Most recent data available

**There are 71,364 Neglected or Delinquent children included in this figure

Title I, ESEA
1979-80 School Year*
Summer School

	Public	Non-Public	Total	Neglected or Delinquent, of Total
Total Children in the Program	85,142	1,958	87,932	832
Health-related Services Provided:				
Health, nutrition	44.737	2,156	47,194	301
Attendance, Social Work, Guidance, Psychology	71,688	894	73,237	655
Staff Providing Supporting Services, Tutors, Medical Staff, Transportation			3,738	

Other Staff	
Administrative Staff	1,214
Teachers	18,613
Teacher Aides	7,992

Data Source:
Title I Program Directive INST. A310.9, January 29, 1981
Program Directive INST. A310.12, February 18, 1982

*Most recent data available

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Education

2. Project/Activity Title Follow Through Program

3. Contact for further information:

Name Mr. Louis J. McGuinness

Title Director, Division of Follow Through

Street 400 Maryland Avenus, S.W., Room 3624, ROB#3

City Washington State D.C. Zip Code 20202

Telephone (202) 245-9846

4. Category

- ____ a. Health Education (Information, Curriculum etc.)
- __X__ b. Health Services (Immunizations, Screenings etc.)
- ____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- ____ d. Coordination

5. Anticipated years of operation

- __X__ a. Ongoing
- __X__ b. FY 1983
- ____ c. FY 1984
- ____ d. Other (describe) Follow Through is scheduled to be phased into the block grants during fiscal year 1984-1985

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6. **Target Group**

__X__ a. **Primary Grade Students**
_____ b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**
_____ e. **Environmental**
_____ f. **Other** ____________ **(describe)**

7. **Brief description**

Follow Through was initially established in order to sustain and expand on the gains made by children in Head Start or similar pre-school programs. Although Follow Through was originally conceived as an operational program, it was decided early that Follow Through should be primarily a research and development effort since sufficient funds for an operational service program were not available.

The Follow Through program incorporates the concept of planned variation, i.e., implementing alternative approaches to education and development of low-income children in kindergarten through third grade. Institutions designated as sponsors, and funded by Follow Through from the national level, have developed these approaches and are implementing them within a program of comprehensive services, and parent and community involvement. The comprehensive service plan includes preventive screening, referral, treatment, follow-up procedures and activities and resources designed to encourage greater responsivess of existing health programs to the needs of Follow Through families.

During FY 1982-83, there were 69 local projects with approximately 30,0000 children participating in Follow Through Programs. Some of the approximately 30,0000 Follow Through children may not have received 100% of the health services over the past three years because of a reduction in our budget. Brief descriptions of the Follow Through Program health activities are given in the following paragraphs.

Medical services for all Follow Through children include: full physical examination at least annually; 100% fulltime Follow Through nurse-health specialist; Follow Through-provided escort and transporation for parent and child to referral agency when necessary. And at least two of the following ancillary-type services: Follow Through-provided health or hygiene instruction for children; blood pressure screening; speech therapy availability, at least on a referral basis; availability of Follow Through dollars on an emergency basis for medicine; Follow Through established sources for full eye examination and glasses.

Dental services for all Follow Through children include: semi-annual check and cleaning of each child's teeth by dentist or dental technician, with provision for follow-up dental work (fillings, extractions, etc.), as needed. And at least two of the following ancillary-type services: in-classroom dental hygiene instruction; Follow Through provided tooth brushes (toothpaste, floss) for use in classrooms; parent workshops on dental hygiene; Follow Through provided escort and transportation when needed for follow-up dental work.

A psychologist, in addition to handling referrals, conducts on-site affective (social-emotional) development program for all Follow Through classes and works with Follow Through Social Worker and Health Aide-type staff member(s).

The Follow Through nutrition program, in addition to including a Class A Lunch, has at least four features--e.g., nutrition information is sent home to parents on a regular basis (through newsletter, pamphlet series, etc.); an inclassroom nutrition program, including cooking lessons, units and/or kits, or regularly cooking familiar or ethnic foods; nutrition workshops for parents; varied nutritional breakfast and/or snacks are part of the program; nutrition education students or specialists are used in the classrooms/and/or to conduct parent workshops.

Program has minimum staffing of 100% time Social Worker or Social Worker-Parent (Family) Coordinator combination who provide (or coordinate provision of) at least eight of the following types of services for Follow Through children and their families: Follow Through staff home visits as needed; clothing for families when needed; parent training sessions; parent education sessions; referrals to local agencies or social service organizations; consultations with children and/or families as needs arise; "rap" sessions for parents; Christman/Birthday toys where needed; investigation of truancy problems; Follow Through-prepared pamphlet or handbook of community resources for parents.

DIVISION OF FOLLOW THROUGH

OVERVIEW

Appropriations, Number of Sponsors, Number of Projects, ~~Number of Low-Income Children Funded~~, ~~and Grades of Classes for Follow Through~~ (FY 1968 - FY 1978)

Fiscal Year	Appropriations (in millions)	School Year 1/	No. of Sponsors 2/	No. of Local Projects	No. of Low-Income Children Funded	Grades of F.T. Classes
1968 3/	3.75 3/4/	1967-68 3/	0	39	2,900	K-1
1968 3/	11.25 3/4/	1968-69 3/	14	92	15,500	K-1
1969 4/	32.00	1969-70	20	160	37,000	K-2
1970 4/	70.30	1970-71	22	178	60,200	K-2
1971 4/	69.00	1971-72	22	178	78,170	K-3
1972 4/5/	63.06	1972-73	22	173	84,000	K-3
1973	57.70	1973-74	22	170	81,000	K-3
1974 5/	53.00	1974-75	22	169	78,000	K-3
1975 5/	55.50	1975-76	20	165	76,500	K-3
1976	59.00	1976-77	20	164	75,700	K-3
1977	59.00	1977-78	20	161	74,675	K-3
1978	59.00 6/	1978-79	19	157	70,500	K-3
1979	59.00	1979-80	19	153	68,819	K-3
1980	44.25	1980-81	19	147	63,558	K-3
1981	26.25	1981-82	16	84	36,319	K-3

1/ School year means the school year for which the fiscal year appropriation in column (2) was primarily used.

2/ The numbers in this column represent the numbers of grants for sponsors for the year.

3/ Fiscal year 1968 appropriation of $15 million was the primary source of both school year 1967-68 and 1968-69.

4/ The appropriations include funds for the Follow Through Office's salaries and expenses.

5/ Includes supplemental appropriations.

6/ 3 million transfered to SAFA

1982 19.44 1982-83 15 69 29,817 K-3

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Education, Elementary and Secondary Education

2. Project/Activity Title Migrant Education Program Migrant Student Record Transfer System

3. Contact for further information:

Name Ms. Lila Shapiro

Title Education Program Officer

Street 400 - 6th Street S.W.

City Washington State D.C. Zip Code 20202

Telephone (202) 245-2222

4. Category

x a. Health Education (information, curriculum, etc.)
x b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
x d. Coordination

5. Anticipated years of operation

x a. Ongoing
x b. FY 1983
x c. FY 1984
___ d. Other ________ (describe)

69

6. **Target Group**

X a. **Primary Grade Students**
X b. **Secondary Students**
______ c. **College Students**
______ d. **Faculty and staff**
______ e. **Environmental**
X f. **Other** Preschool
(describe)

7. **Brief description**

The Migrant Student Record Transfer System (MSRTS) is an automated telecommunication data system which stores and transmits pupil, academic and health data on every identified eligible migratory child. The system's primary purpose is to maintain accurate and complete records on the changing academic and health status of migrant children in order to assist in establishing and maintaining continuity of educational experiences for migrant children.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. **Agency** Department of Education, Elementary and Secondary Education Migrant Education Program
2. **Project/Activity Title** Basic State Formula Grant Program

3. **Contact for further information:**

Name Mr. Dustin Wilson

Title Director, Division of Operations

Street 400 - 6th Street S.W.

City Washington **State** D.C. **Zip Code** 20202

Telephone (202) 245-2222

4. **Category**

x a. Health Education (information, curriculum, etc.)
x b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
x d. Coordination

5. **Anticipated years of operation**

x a. Ongoing
x b. FY 1983
x c. FY 1984
___ d. Other ____________ (describe)

71

6. **Target Group**

X a. **Primary Grade Students**
X b. **Secondary Students**
___ c. **College Students**
___ d. **Faculty and staff**
___ e. **Environmental**
___ f. **Other** Preschool
(describe)
(and includes students 0-21)

7. **Brief description**

To establish and improve programs to meet the special educational needs of migratory children of migratory agricultural workers or migratory fishers. Types of services include:

1) Academic instruction
2) Remedial and compensatory instruction
3) Bilingual and multicultural instruction
4) vocational instruction and career education services
5) Special guidance, couseling, and testing services
6) Preschool services
7) Other educational services that are not available to eligibile migratory children in qualities and quantities that enable them to achieve
8) Acquisition of instuctional material (books and other printed or audiovisual materials and equipment)
9) Other services that assist children in making educational gains (medical and dental screening, follow-up, clothing, etc.)

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Education, Elementary and Secondary Education Migrant Education Program

2. Project/Activity Title Interstate/Intrastate Coordination Project

3. Contact for further information:

Name Mr. Dustin Wilson

Title Director, Division of Operations

Street 400 - 6th Street S.W.

City Washington State D.C. Zip Code 20202

Telephone (202) 245-2222

4. Category

x a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
x d. Coordination

5. Anticipated years of operation

___ a. Ongoing
x b. FY 1983
___ c. FY 1984
___ d. Other __________ (describe)

6. **Target Group**

X a. **Primary Grade Students**
X b. **Secondary Students**
____ c. **College Students**
X d. **Faculty and staff**

____ e. **Environmental**
X f. **Other** Preschool
(describe)

(Covers ages 0-21)

7. **Brief description**

The Interstate/Intrastate Coordination Program provides financial assistance to State educational agencies for projects designed to improve interstate and intrastate coordination of migrant education activities among State and local educational agencies and other operating agencies participating in the basic Migrant Education Program.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Education, Elementary and Secondary Education
Migrant Education Program

2. Project/Activity Title College Assistance Migrant Program (CAMP)

3. Contact for further information:

Name Mr. William Stormer

Title Director, Division of Program Coordination and Support
Migrant Education Program

Street 400 - 6th Street, S.W.

City Washington State D.C. Zip Code 20202

Telephone (202) 245-2222

4. Category

____ a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
__x__ d. Coordination

5. Anticipated years of operation

____ a. Ongoing
__x__ b. FY 1983
____ c. FY 1984
____ d. Other ____________
(describe)

6. **Target Group**

______a. **Primary Grade Students**
______b. **Secondary Students**
__x___c. **College Students**
______d. **Faculty and staff**
______e. **Environmental**
______f. **Other** ______________ (describe)

7. **Brief description**

The Title IV, Higher Education Act, College Assistance Migrant Program (CAMP) authorizes discretionary grants to institutions of higher education (IHEs) and other public or nonprofit private agencies (who cooperate with IHEs) for projects designed to assist students who are engaged, or whose families are engaged, in migrant and other seasonal farmwork. Specifically, the program assists eligible students who are enrolled or are admitted for enrollment on a full-time basis in the first academic year at an IHE. The program provides services to enable first year undergraduates to make the transition from secondary to postsecondary education, to develop the motivation necessary for success in postsecondary education, and to complete the first post-secondary year successfully.

Participants receive tuition, stipends and room and board for personal expenses. The programs are designed to provide necessary tutoring and counseling and assistance in obtaining grants, loans, and work-study funds to assist with the remaining three undergraduate school years.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Education, Elementary and Secondary Education

2. Project/Activity Title Migrant Education Program High School Equivalency Program (HEP)

3. Contact for further information:

Name Mr. Joseph Bertoglio

Title Education Program Officer

Street 400 - 6th Street S.W.

City Washington State D.C. Zip Code 20202

Telephone (202) 245-2222

4. Category

____ a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
__x__ d. Coordination

5. Anticipated years of operation

____ a. Ongoing
__x__ b. FY 1983
____ c. FY 1984
____ d. Other ____________
(describe)

6. **Target Group**

_____ a. **Primary Grade Students**
_____ b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**

_____ e. **Environmental**
__X__ f. **Other** Youth and adults
(describe)
beyond compulsory school attendance age.

7. **Brief description**

The Title IV, Higher Education Act, High School Equivalency (Migrant) Program (HEP) provides discretionary grants to institutions of higher education (IHEs) and other public or non profit private agencies (who cooperate with IHEs) for projects of academic and supporting services and financial assistance designed to assist students who are engaged, or whose families are engaged, in migrant and other seasonal farmwork. Specifically, the program attempts to assist eligible students to obtain the equivalent of a secondary school diploma and subsequently to gain employment or be placed in an institution of higher education or other postsecondary education or training. The program provides whatever outreach, teaching, counseling and placement services are necessary to recruit and serve eligible migrant and seasonal farmworker dropouts who are beyond the age of compulsory school attendance.

Participants receive room and board and stipens for their personal expenses. They are housed on a college or university campus and may make use of the cultural, recreational, health, and other campus facilities.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Education Programs, OESE

2. Project/Activity Title

3. Contact for further information:

Name Hakim Khan

Title Acting Director, Indian Education Programs, OESE

Department of Education

Street 400 Maryland Avenue, S.W.

City Washington State D.C. Zip Code 20202

Telephone (202) 245-8020

4. Category

☐ a. Health Education (Information, Curriculum etc.)
☒ b. Health Services (Immunizations, Screenings etc.)
☐ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
☐ d. Coordination

5. Anticipated years of operation

☒ a. Ongoing
☒ b. FY 1983
☐ c. FY 1984
☐ d. Other (describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
____ c. College Students
____ d. Faculty and staff
____ e. Environmental
____ f. Other ____________ (describe)

7. Brief description

Indian Education Programs (IEP) has no health projects, as such. However, IEP estimates that approximately one-third (371) of its Part A projects have health services components. Under Part A of the Indian Education Act, grants are awarded to school districts enrolling at least 10 Indian students to meet the special educational needs of those students. For school year 1982-1983, 1,113 school districts received Part A grants.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education

2. Project/Activity Title Chapter II, Education Consolidation and Improvement Act of 1981 (Education Block Grant)

3. Contact for further information:

Name Margaret Brenner

Title Education Program Specialist

Street Donohoe Building Room 1167

City Washington State D.C. Zip Code 20202

Telephone (202) 245-8537

4. Category

- x a. Health Education (Information, Curriculum etc.)
- x b. Health Services (Immunizations, Screenings etc.)
- x c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- x d. Coordination

5. Anticipated years of operation

- x a. Ongoing
- ___ b. FY 1983
- ___ c. FY 1984
- ___ d. Other ________ (describe)

6. Target Group

__x__ a. Primary Grade Students
__x__ b. Secondary Students
_____ c. College Students
__x__ d. Faculty and staff
_____ e. Environmental
__x__ f. Other community (describe)

7. **Brief description** - Chapter 2 of ECIA consolidated 42 categorical educational programs into a single block grant to states.

Of the grants to the States, at least 80 percent is distributed to local educational agencies on the basis of enrollment in elementary and secondary public and private schools, adjusted to provide additional amounts to districts having the greatest numbers or percentages of children whose education imposes a higher than average cost per child. Private school children and teachers participate equitably in the benefits of the programs. Up to 20 percent of the state grant is used at the state level for programs and/or administrative costs.

A state advisory council, appointed by the Governor, advises the state educational agency on the formula used to distribute funds to local educational agencies and on operation of the state (20%) portion of the program. How the funds are used at the local level is entirely at the discretion of local authorities, so long as they are used within the broad purposes intended by law.

Among these purposes are: school improvement, including curriculum development and management of school programs, teacher training and inservice staff development, basic skill improvement; math, science and the humanities, consumer, career, environmental and health education; encouraging disadvantaged students in biomedical careers; use of public education facilities for community centers; promoting school safety and reducing school vandalism; acquisition of school library resources, textbooks and instructional materials and equipment.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency EDUCATION/Ofice of the Secretary's Regional Representative/Region III, Philadelphia

2. Project/Activity Title Drug and Alcohol Abuse Pilot Program

3. Contact for further information:

Name Mr. Joseph Ambrosino

Title Secretary's Regional Representative

Street 3535 Market Street

City Philadelphia State PA Zip Code 19101

Telephone (215) 596-1001

4. Category

X a. Health Education (Information, Curriculum etc.)
b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
b. FY 1983
c. FY 1984
d. Other ____________ (describe)

6. Target Group

___X___ a. Primary Grade Students
___X___ b. Secondary Students
_______ c. College Students
_______ d. Faculty and staff

_____ e. Environmental
_____ f. Other _________________
(describe)

7. Brief description

Mr. Ambrosino has organized a task force to work in conjunction with the National Program on Drug and Alcohol Abuse towards preventative and rehabilitation efforts. Particular concentration will be in dissemination of information to public, private, and parochial elementary and secondary schools; identification and publicizing of existing exemplary programs; coordination of directives and efforts of various agencies, parent groups and associations; provide for necessary technical assistance as needed and requested to any and all interested parties.

Dr. Carlton Turner, Director for Drug Abuse Policy for the White House, met with the task force, which includes Dr. James Campbell, headmaster of Caravel Academy (Delaware), Mr. Robert Pfleger, Director of Rehabilitation Program for Alcoholism, Southern Hills Hospital, Portsmouth, Ohio, and Mr. Eugene Kane, Region III staffer and coordinator for the program.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education

2. Project/Activity Title

3. Contact for further information:

Name Myles J. Doherty

Title Director, National Alcohol & Drug Abuse Education

Street 400 Maryland Avenue S.W.

City Washington State D.C. Zip Code 20202

Telephone (202) 472-7777

4. Category

Drug & Alcohol Prevention
X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
d. Coordination

5. Anticipated years of operation

X a. Ongoing
b. FY 1983
c. FY 1984
d. Other
(describe)

6. Target Group

____ a. Primary Grade Students
X b. Secondary Students
____ c. College Students
____ d. Faculty and staff
____ e. Environmental
____ f. Other ____________
(describe)

7. Brief description

The Alcohol and Drug Abuse Education Program uses a school team approach to drug and alcohol abuse prevention. The network of five regional training centers provides training and follow-up-on-site support to clusters consisting of two to four teams of five to seven representatives of local schools and communities.

Emphasis is on helping tems and clusters of people to assess and solve problems themselves. This entails the development of a plan of action, implementation of the plan, and on-site support (technical assistance and field training).

Now in its tenth year, the program has trained nearly 4,000 teams throughout the country. These teams in turn have had an impact on millions of individuals -- students, parents, teachers, administrators and community leaders -- in their respective communities.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education

2. Project/Activity Title Asbestos School Hazard Detection and Control Act of 1980

3. Contact for further information:

Name Lawrence J. LaMoure

Title Education Program Specialist

Street 6th and D Street S.W. Room 1725

City Washington State D.C. Zip Code 20202

Telephone (202) 245-2284

4. Category

- ____ a. Health Education (Information, Curriculum etc.)
- ____ b. Health Services (Immunizations, Screenings etc.)
- __X__ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- ____ d. Coordination

5. Anticipated years of operation

- __X__ a. Ongoing
- ____ b. FY 1983
- ____ c. FY 1984
- ____ d. Other ____________ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
x c. College Students
X d. Faculty and staff
x e. Environmental
f. Other ____________ (describe)

7. Brief description

The Asbestos Detection and Control Program, authorized by the Asbestos School Hazard Detection and Control Act of 1980, Pub. L. 96-270 (20 U.S.C. 3601-3611)(Act), provides for Federal grants to local educational agencies (LEAs) and State educational agencies (SEAs) to identify asbestos hazards in school buildings, and for Federal interest-free loans to LEAs to correct those hazards. Even when no funds are appropriated for the program, the Act requires SEAs to submit to the Secretary a State plan describing certain SEA activities relating to asbestos detection and control. At present, Congress has not appropriated funds under the program.

The law establised a Task **Force composed of representatives (one each)** of the Department of Education, Department of Health and Human Services, National Cancer Institute, Enviromental Protection Agency, National Institute of Environmental Health Sciences, Occupational Safety and Health Administration, and four representatives from among organizations concerned with education and health. The task force has not met since December 1980.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency EDUCATION/Office of the Secretary's Regional Representative -- Region IX, San Francisco, CA
2. Project/Activity Title Asbestos School Hazard Detection Program

3. Contact for further information:

Name Dr. Albert Pilz

Title Program Officer

Street 50 United Nations Plaza

City San Francisco State CA Zip Code 94102

Telephone (415) 556-4570

4. Category

____ a. Health Education (Information, Curriculum etc.)
____ b. Health Services (Immunizations, Screenings etc.)
X c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination

5. Anticipated years of operation

X a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ________ (describe)

89

6. **Target Group**

_____ a. Primary Grade Students
_____ b. Secondary Students
_____ c. College Students
_____ d. Faculty and staff
__X__ e. Environmental
_____ f. Other ______________ (describe)

7. **Brief description**

The Region IX office of ED and the Environmental Protection Agency have an ongoing assistance program for asbestos hazard detection in the schools, in accordance with the Act of 1980. Dr. Albert Pilz, of Region IX ED office, has been responsible for the development of asbestos awareness programs, literature on the subject, and has assisted in site visits to evaluate asbestos problems and solutions. He has ongoing involvement in planning sessions with EPA, dissemination of literature, and promoting public awareness.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education

2. Project/Activity Title Education Resources and Information Center (ERIC)

3. Contact for further information:

Name Charles W. Hoover

Title Assistant Director, Information Resources

Street 1200 19th Street, N.W.

City Washington State D.C. Zip Code 20208

Telephone (202) 254-5500

4. Category

x a. Health Education (information, curriculum, etc.)
__ b. Health Services (immunizations, screenings, etc.)
__ c. Health School Environment (asbestos abatement, safe environment, etc.)
__ d. Coordination

5. Anticipated years of operation

x a. Ongoing
__ b. FY 1983
__ c. FY 1984
__ d. Other ________ (describe)

6. Target Group

__ a. Primary Grade Students
__ b. Secondary Students
x c. College Students
x d. Faculty and Staff

__ e. Environmental
__ f. General Public
x g. Parents
__ h. Other*

*Teachers, administrators, pre-school, K-12

7. Brief description

ERIC is an information system in existence since 1966 and currently sponsored by the National Institute of Education, within the U.S. Department of Education.

ERIC is designed to provide users wtih ready access to primarily the English-language literature dealing with education. It does this through a variety of products and services, many of which are described in the brochure entitled "A Pocket Guide to ERIC", e.g. data bases, abstract journals, microfiche, computer searches, online access, document reproductions, analyses and syntheses, etc.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education

2. Project/Activity Title National Diffusion Network

3. Contact for further information:

Name Linda Jones

Title Education Program Specialist

Street 1200 19th Street, N.W.

City Washington State D.C. Zip Code 20036

Telephone (202) 653-7003

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

____x a. Primary Grade Students
____x b. Secondary Students
_____ c. College Students
____x d. Faculty and staff
_____ e. Environmental
_____ f. Other ________________
(describe)

7. Brief description

The National Diffusion Network (NDN) makes exemplary educational programs available for adoption by schools, colleges and other institutions. The NDN provides dissemination funds to exemplary programs for two purposes: (1) to enable the programs to make public and private schools, colleges and other institutions aware of what they offer, and (2) to enable the programs to provide inservice training, follow-up assistance and, in some cases, curriculum materials to schools and others that want to adopt them. NDN was established upon the belief that there are few problems encountered by schools that have not been solved successfully in some other location. NDN's role is to find those successful solutions and to bring them to the attention of potential users who may then choose from the array of programs the particular program that meets the school district's need, philosophy, and resources. NDN also provides funds to persons known as state facilitators, whose job is to serve as matchmakers between NDN programs and schools and organizations that could benefit from adopting the programs.

There are programs for many content areas, ranging from the basic skills of reading, mathematics, and oral and written communication to career education, technology, health and physical education. Attached is descriptive information on NDN's funded and non-funded health programs as well as the physical education programs.

PROJECT

SCHOOL HEALTH CURRICULUM PROJECT (SHCP)

A comprehensive health education program designed to foster student competencies to make decisions enhancing their health and lives.

target audience

Approved by JDRP for students of all abilities, grades 5-7.

description

The SHCP includes a planned sequential curriculum, a variety of teaching methods, a teacher training program, and strategies for eliciting community support for school health education. It involves students, teachers, educational administrators, other school staff, community health personnel, and the families of participating students. Through group and individual activities, children learn about themselves by learning about their bodies. There is one 10-week unit for each grade level. Grade 5 studies the respiratory system, grade 6 the circulatory system, and grade 7 the nervous system. Every unit emphasizes the relationships between one's own behavior and the functioning of the system being studied. Access to a variety of stimulating learning resources, including audiovisuals, models, community health workers, and reading materials, is abundantly provided. The curriculum is designed to integrate with the lives and personality development of children by providing situations in which they may assume responsibility, research ideas, share knowledge, discuss values, make decisions, and create activities to illustrate their comprehension and internalization of concepts, attitudes, and feelings. The curriculum has been developed to enhance other school subjects such as reading, writing, arithmetic, physical education, science, and the creative arts. As teachers become familiar with the subject matter during training, they simultaneously learn teaching methods. Instead of the traditional classroom approach, the teacher uses a learning center approach, which allows children to move about the room, explore resources, and work together in groups. During training, teachers are given packets of materials that help them develop and explain health-related concepts to students. All of the classroom work is described in the packets, and supplemental ideas are included for variety. The SHCP requires that adopting schools send a full team to one of the various SHCP regional training centers to receive training. This team should consist of two classroom teachers from the level for which the unit is being adopted, the principal, and one or two other school support personnel. Training is offered on condition that the participants provide a training workshop for others. By teaching the unit and carefully following the highly structured plan of the curriculum, teachers gain the experience necessary to present a workshop. The team is then able to train other classroom teachers in their own school and in other schools to use the SHCP effectively.

evidence of effectiveness

Twenty-four separate studies were completed between 1964 and 1978 to ascertain the effectiveness of the curriculum. A recent review and synthesis of these studies indicates that fifth-, sixth-, and seventh-grade units were effective in increasing health-related knowledge and providing positive health-related attitudes.

implementation requirements

Implementation of the SHCP requires a school team comprised of two classroom teachers, the principal, and one or more curriculum support persons to: receive training in the grade level being adopted; utilize SHCP activities for a minimum of 10 weeks during the school year; utilize SHCP teaching materials; involve school administrators, parents, and representatives of community health organizations in the project; and offer a SHCP training workshop for others after the first year.

financial requirements

Teacher training costs, totaling approximately $2,500, can be shared by as many as eight teams (32 members, including 16 teachers). Nonconsumable instructional materials cost about $3,500 per district per grade level. Consumable instructional materials cost about $500 per district per grade level.

services available

Awareness materials are available at no cost. Visitors are welcome any time by appointment at project site and additional demonstration sites in home state and out of state. Project staff are available to attend out-of-state awareness meetings (all expenses must be paid). Training is conducted at project site (all expenses must be paid). Training is also available at adopter site (all expenses must be paid). Implementation and follow-up services are available to adopters (costs to be negotiated).

contact

Ms. Kathleen Middleton, Project Director; ~~Robert F. Guthmann, Jr., Director of Information and Resources~~; National Center for Health Education; School Health Education Project; ~~901 Sneath Ln., Suite 215, San Bruno, CA 94066. (415) 952-7922 or (800) 227-6934.~~ 211 Sutter, 4th Floor, San Francisco, CA 94066
(415) 781-6144

Developmental Funding: HEW: U.S. Public Health Service

JDRP No. 79-14 Approved: 5/8/79

0038

PROJECT: SJNEP: San Jose Nutrition Education Project - Nutrition Through Science

TARGET AUDIENCE: Grades K-4

DESCRIPTION: A nutrition education program that actively involves a multicultural population of project students, teachers, parents and school food service members in bi-weekly classroom activities that reflect attitudes and knowledge about food and nutrition. Instructional materials were designed to closely integrate with regular classroom studies including science, health, social studies and reading.

LOCATION: San Jose, California

96

0072

PROJECT: Muscogee Health Project

TARGET AUDIENCE: Approved by JDRP for Grade K-12

DESCRIPTION: This program integrates science processes and science concepts with health content, and provides a vehicle for teaching students to apply science processes and techniques to daily living. The concept of "all things change through time" is given greater clarity by students discovering how their own bodies change as they mature emotionally and physically. Emphasis is placed on observing, classifying, predicting, inferring, measuring, using numbers, relating time, and communicating.

The curriculum was developed for the total student population with minor modifications in sequence for special education students, including gifted. The educational activities have been implemented with students successfully as part of the regular science curriculum.

LOCATION: Columbus, Georgia

PROJECT

STUDENT TEAM LEARNING: Intergroup Relations

A set of instructional techniques placing students in four- or five-member multiethnic learning teams to master basic skills.

target audience

Approved by JDRP for students grades 5-12. It is now used in grades 2-4, but no evidence of effectiveness has been submitted to or approved by the Panel.

description

Student Team Learning (STL) consists of three major techniques: Student Teams-Achievement Divisions (STAD), Teams-Games-Tournament (TGT), and Jigsaw. All three require students to work in learning teams that are heterogeneous in terms of sex, race, and past performance. In STAD, students study worksheets in their teams following a teacher presentation. Then they take quizzes individually to demonstrate how much they have learned. The students' quiz scores are summed to form a team score, which later is printed in a weekly newsletter. TGT is similar to STAD, except that students display their learning by playing academic games instead of taking quizzes. In Jigsaw, students become "experts" on topics relating to narrative material they have read and teach these topics to their teammates. STL is the umbrella term for these three programs. Two STL programs have JDRP approval of their own. STAD is approved for language arts and TGT for language arts and math. Any district that adopts STL also adopts STAD and TGT.

Student Team Learning can be used with the teacher's manual and teacher-made curriculum materials alone. Inexpensive materials in mathematics, language arts, and nutrition are available (see below). The techniques are very practical. They are in use in hundreds of schools across the U.S.

The effects of Student Team Learning on intergroup relations are strong and consistent because the team goal and team interactions allow students to view one another positively. There is no specific mention of race or ethnicity in the program. Because the program is inexpensive, takes no more class or teacher time than traditional methods, and increases achievement as well as improving intergroup relations, it can be used as a regular part of class instruction in any subject.

evidence of effectiveness

Six studies have shown that Student Team Learning techniques increase intergroup friendships significantly more than control methods. The studies were conducted in integrated inner-city, rural, and suburban schools, and involved white, black, and Mexican-American students. Student Team Learning techniques have had positive effects on learning in the areas of mathematics, language arts, social studies, and reading, as well as on self-esteem, mutual concern, and liking for school.

implementation requirements

Individual teachers can use Student Team Learning with the manual alone or with the available training filmstrip/tape. Participation in a six-hour workshop is recommended.

financial requirements

Manual and materials for Student Team Learning with teacher-made materials, $3. Manuals with single copies of worksheets and quizzes for 20 one-week units (language arts 3-6, language arts 7-8, mathematics 3, 4, 5, 6, 7, and 8, consumer math, nutrition 4-6 and 10-12), $10 each; language arts 3-6 (100 units), $25. Supplementary manuals for reading, mathematics, language arts, social studies, mainstreaming, and class management, $1 each.

services available

Awareness materials are available at no cost. Visitors are welcome any time by appointment at project site and additional demonstration sites out of state. Project staff are available to attend out-of-state awareness meetings (costs to be negotiated). Training is conducted at project site (adopter pays only its own costs). Training is also available at adopter site (costs to be negotiated). Implementation and follow-up services are available to adopters (costs to be negotiated).

contact

Ruth H. Carter, Dissemination Coordinator; Center for Social Organization of Schools; 3505 N. Charles St.; Baltimore, MD 21218. (301) 338-8249.

Developmental Funding: National Institute of Education JDRP No. 78-199a Approved: 2/15/79

PROJECT HAVE A HEALTHY HEART

A heart health curriculum and aerobic fitness program for regular classroom, physical education, and health teachers and their students.

target audience Approved by JDRP for students in grades 4-6. Evidence of effectiveness for this program in grades 7-8 has been submitted to but not approved by the Panel.

description There is evidence to suggest that several factors associated with heart disease are related to habits acquired in childhood. The developers of this three-month program assume that educating children about such relationships and teaching them health-promoting habits have great potential for reducing the impact of heart disease. Conducted either within the regular classroom or as part of a physical education or health period, this supplemental health course consists of separate fitness and life-style units, each with its own set of student materials. Developed in cooperation with sports medicine physicians and members of the American Heart Association's Heart, Health, and the Young Committee, the Fitness Book (third-grade readability level) contains information on setting up and maintaining a personal aerobic fitness program. Developed in cooperation with cardiologists, biomedical researchers, and dieticians, the Life-Style Booklet (fourth-grade readability level) conveys information on the effects of smoking, overweight, stress, heredity, exercise, cholesterol, and hypertension on heart disease. Skill-paks containing mazes, puzzles, word scrambles, quizzes, and other activities reinforce concepts taught in the two student booklets. Student materials are used in the classroom for approximately 30 minutes two or three times a week. Students also participate in an aerobic fitness program. (No medical release was required for participating students at the project site. Local physicians determined that students healthy enough to take part in school physical education program activities could participate without risk.) They perform aerobic exercise at their target rate for approximately 20 minutes three times a week. Teachers supervise and participate in all student activities. Project-developed teacher materials include a teacher's manual, a fitness program kit, four videotapes, and resource/enrichment packets.

Contact the project about available training and other services.

contact Sherry Avena; Have a Healthy Heart; 4095 173rd Place, S.E.; Bellevue, WA 98008. (206) 746-0331.

Developmental Funding: USOE ESEA Title IV-C JDRP No. 80-38 Approved: 12/9/80

Compiled Summer 1981

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PROJECT

LEARNING FOR LIFE

Motivational, inventive nutrition/fitness curricula, with original materials for classroom, health, and physical education teachers.

target audience Approved by JDRP for students in grades 2 and 5.

description Concern about the relationships between eating, exercise, smoking, and stresscoping patterns and such physical conditions as heart disease, hypertension, emphysema, and certain cancers is on the increase. On the assumption that early acquisition of health knowledge helps to foster positive health attitudes and behaviors that can last a lifetime, project staff developed this program, which uses imaginative and challenging materials to encourage children to make wise decisions on issues of nutrition and physical fitness. The program consists of two courses. Both can be used in a health, science, physical education, or integrated curriculum. On the rationale that health patterns of second-grade students are still evolving but that such students already possess basic learning skills that can be applied to new knowledge, the first course is targeted to students in grade 2. Because fifth-grade students are old enough to make many of their own life-style choices but still young enough to be receptive to the influence of responsive adults, the second course was designed for students in grade 5. The same nutrition and fitness concepts underlie both curricula, and the two courses were designed to complement each other without duplication. The second-grade curriculum, "The Doofus Stories," is a 10-week daily classroom program. Its core is a story read to the class by the teacher. Supplementary activities take place in class, at home, in the community, and in physical education classes. The fifth-grade curriculum, "From the Inside Out," is a 16-week daily classroom program with supplementary activities at home, in the community, and in the gym. Project-developed curriculum materials include student books, teacher's guide and resource manual for both courses, student worksheets, vocabulary cards, and posters. All student materials are generously illustrated.

Contact the project about available training and other services.

contact Ann Buxbaum, Director; Learning for Life/MSH; 141 Tremont St.; Boston, MA 02111. (617) 482-9450.

Developmental Funding: USOE ESEA Title IV-C **JDRP No.** 80-43 **Approved:** 12/23/80

Compiled Summer 1981

Athletic Health Care and Training

Developed by Stephen G. Rice, M.D., Ph.D., Seattle Public Schools and Division of Sports Medicine, University of Washington

The Athletic Health Care And Training Program seeks to ameliorate the health problems of high school athletes by instituting a health care system adapted from those used at major universities. The components are: (1) the education of coaches, student athletic trainers, school nurses and team doctors, creating a "health care team"; (2) a thorough assessment of the current athletic program for safety and health aspects; (3) development of a centralized training room facility operated by student trainers under adult supervision; and (4) a series of guidelines, protocols, procedures and record keeping forms which constitute an information management system. The program components help ensure the provision of effective health care to high school athletes.

The goal of the Athletic Health Care and Training Program is to enhance the health benefits of athletic activity for high school boys and girls who participate in interscholastic activity (through reduction of the risks and morbidity of injury). The specific objectives are:

Training: The coaches and student trainers who complete the 27 classroom hour training course will demonstrate increased knowledge of athletic health care principles and practices.

Emergency Preparedness and Pre-event Protocols: Experimental schools will demonstrate emergency preparedness and employ pre-event procedures to a greater extent than will control schools.

Injury Recognition: Experimental school coaches will demonstrate a greater ability to recognize injuries than control school coaches.

Post-Injury Protocols: Experimental schools will more closely follow appropriate post-injury procedures than will control schools.

Stephen G. Rice, M.D., Ph.D.
Athletic Health Care and Training Program
Division of Sports Medicine, GB 15
University of Washington
Seattle, Washington 98195

(206) 324-5116

PROJECT OAKLAND UNIFIED SCHOOL DISTRICT FOLLOW THROUGH PROGRAM: Learning Through Literature

An interdisciplinary approach for students in grades K-2 utilizing a literature-centered curriculum.

target audience Approved by JDRP for grades K-2. This program is applicable to other grade levels, but no evidence of effectiveness has been submitted to or approved by the Panel.

description The Learning Through Literature model emphasizes the writing process and has as its overall goal children becoming authors. Reading comprehension and oral language skills provide entry into the writing process. Nutrition education is built into the curriculum through literature selections.

Units of work are organized under a central theme. All possible subject areas are integrated through the theme, with concentration on language development activities.

The literature program supplements the existing basal reading program; it replaces the basal reader only in gifted and talented classrooms, where children have mastered decoding skills.

Learning Through Literature utilizes the library for literature selections. "Books" written by the children are used for additional reading material.

Contact the project about available training and other services.

contact Marilyn M. Jones, Resource Center Coordinator; Oakland Unified School District Follow Through Program; Resource Center; 1011 Union St.; Oakland, CA 94607. (415) 465-5073.

Developmental Funding: USOE Follow Through JDRP No. 77-150 Approved: 9/9/77

Compiled Summer 1981

PROJECT

PRIMARY GRADES HEALTH CURRICULUM PROJECT (PGHCP)

A comprehensive health education program to teach children in grades K-3 about their senses, their bodies, and good health habits.

target audience Approved by JDRP for students in grades K-3.

description Like the School Health Curriculum Project, its companion program for students in grades 4-7, the PGHCP has been designed to assist children to make informed decisions about personal health practices. In the kindergarten unit, "Happiness Is Being Healthy," children are introduced to their five senses, feelings, caring for their health, and general health habits. The first-grade unit, "Super Me," expands on the senses of taste, touch, and smell and their roles in communicating information about personal and environmental health; and explores self-concept development and individuality as well. The second-grade unit, "Sights and Sounds," emphasizes the emotions and methods of communication with regard to the senses of sight and hearing. In the third-grade unit, "The Body, Its Framework and Movement," students study the skeletal and muscular systems while exploring how the senses provide information about bodily functions and the ways in which health is influenced by the environment. The PGHCP program has seven components. The health content represents the body as a network of senses and feelings that interact with other body systems and require cultivation and care. Teaching/learning methods emphasize small-group learning centers and peer teaching, exploration of ideas through experiential activities, and the use of a wide variety of media aids and community health personnel and resources. The training program involves teachers, administrators, and other school personnel in active, participatory workshops. Community development activities involve school personnel, parents, health professionals, and the community. Other subject areas and skills, including reading, writing, arithmetic, art, and drama, are integrated into health-centered learning activities. A series of evaluation procedures and instruments measures the effectiveness of the program at each grade level.

Contact the project about available training and other services.

contact Ms. Kathleen Middleton, Project Director
~~Robert S. Gutmann, Jr., Director of Information and Resources;~~ National Center for Health Education; School Health Education Project; ~~901 Sneath Ln., Suite 215; San Bruno, CA 94066. (415) 952-7922 or (800) 227-6034.~~ 211 Sutter, 4th Floor, San Francisco, CA 94066
(415) 781-6144

Developmental Funding: HEW: Bureau of Health Education (U.S. Public Health Service) JDRP No. 80-6 Approved: 5/23/80

Compiled Summer 1981

PROJECT

PROJECT SCAT: Skills for Consumers Applied Today

A consumer education program in health and money management for high school students.

target audience Approved by JDRP for students in grades 9-12. Portions of the program have been used in other settings with adult students, but no evidence of effectiveness has been submitted to or approved by the Panel.

description Each of the two one-semester courses developed by this project is designed to acquaint students with basic elements of our economic system and to help them to acquire the skills, concepts, and knowledge required to function as informed and wise consumers. Each course addresses six topics. "Health and the Consumer" deals with balanced diet, food additives, food shopping, medical care, personal grooming, and product safety; "Money Management and the Consumer," with basic economic skills, budgeting, banking, credit, insurance, and taxes. Each topic is treated in a separate student Packaged Activities for Learning (PAL) booklet. Each student booklet is accompanied by a teacher PAL. Instructional materials for the 12 units include student booklets, teacher guides, and classroom aids. Student PALs, illustrated with project-developed cartoon-type characters, follow a uniform format, which consists of an introduction, vocabulary, content, and subjective and objective review questions. Teacher PALs contain content outlines; behavioral objectives; activities and suggested resources; instructional aids, including tests, activity sheets, film guides, and transparency masters; and answer keys. The project has also developed student competency tests for both courses, unit tests, transparency sets, and a teacher training manual that outlines course purposes and implementation possibilities. The reproducible project-developed materials can be used in separate one-semester elective courses or integrated into existing health and economics courses. A variety of student populations and teaching styles are appropriate. Adaptation of course materials to local needs is a feature of training for adopters.

Contact the project about available training and other services.

contact W. M. Ausherman, Director; Project SCAT; Osceola County School District; P.O. Box 1948; 304 N. Beaumont Ave.; Kissimmee, FL 32741. (305) 847-3147.

Developmental Funding: USOE ESEA Title IV-C JDRP No. 80-45 Approved: 12/23/80

Compiled Summer 1981

Decisions About Drinking

The CASPAR (Cambridge and Somerville Program for Alcoholism Rehabilitation) Alcohol Education Program

Somerville, Massachusetts

Summary Statement

Studies in Massachusetts and Georgia show that the CASPAR curriculum, Decisions About Drinking, consistently produces increased factual information about alcohol and alcoholism and changes student attitudes toward drinking, consistent with responsible decision-making norms. Considering that a brief intervention, about 7-10 class periods over two weeks, is detectable 12-18 months later, these data suggest that the curriculum makes a strong impression. In addition, in the classroom, the curriculum produces atypical student conduct that is helpful in identifying children with alcohol-related concerns, and which makes it possible for trained teachers to refer children to appropriate community resources.

Mrs. Lena DiCicco
CASPAR, Inc.
Alcohol Education Program
226 Highland Avenue
Somerville, Massachusetts 02143

(617) 623-2080

PROJECT

PEOPEL: Physical Education Opportunity Program for Exceptional Handicapped Learners

A specially designed, success-oriented physical education program for high school students with unique needs utilizing supervised peer tutors (student aides) to emphasize individualized learning and instruction.

target audience

Approved by JDRP for handicapped students and nonhandicapped peer tutors, grades 9-12. This program has been adapted for use in middle and elementary schools, but no evidence of effectiveness has been submitted to or approved by the Panel.

description

Project PEOPEL was developed to help schools meet the needs of both handicapped (exceptional) and nonhandicapped students through peer tutoring in a success-oriented physical education experience. PEOPEL is designed for students who because of some physical, mental, social, or emotional condition will benefit more from an individualized program than from general physical education. Through individualized learning in physical education, students develop mental, social, emotional, and physical abilities at their own pace. The emphasis on the individualized learning of a variety of physical activities is made possible by utilizing peer tutors, called PEOPEL Student Aides, who have completed a special training/orientation class and are under the direct supervision of the physical education teacher. This provides a one-to-one instruction ratio in a coeducational setting with up to 30 students per class (15 exceptional learners and 15 student aides). Each student experiences fun and daily success in a variety of individual, dual, or team activities. The organization of PEOPEL classes is similar to that of general physical education classes. In addition, students are pretested to determine entry skill level based on performance objectives within the Unit of Instruction. The PEOPEL Teacher's Guide has 35 separate Units of Instruction which were developed with task-analyzed performance objectives. Unit of Instruction Performance Objectives are included for history, basic rules, etiquette, terminology, safety, and skill progressions. Other PEOPEL materials are the Administrative Guide and Student Aide Training Manual.

PEOPEL inservice training is designed to assist physical education teachers and staff in implementing the peer teaching components of PEOPEL within their school. Training encompasses both administrative and instructional considerations, as well as short- and long-term planning. Staff training participants should include an administrator, counselor, special educator, physical educator, and school nurse from each adopting school. One day of staff training is required for three or fewer adopting schools; one and one-half to two days of training for four or more schools.

evidence of effectiveness

Evaluation of high school students was conducted over a three-year period by pre- and posttesting on a four-item composite Physical Fitness Battery and the Wear's Physical Education Attitude Scale. The data showed significant gains in fitness and attitudes of PEOPEL students ($p \le .05$) with minimal or no gains in control group ("adapted P.E." with no student aides).

implementation requirements

Program implementation is flexible according to the needs of students, a class, a school, or a district. Instructional procedures enable a school/district to implement PEOPEL with student aides and exceptional students with varying abilities in grades 9-12. No special equipment or facilities are required. Inservice training is designed to meet the needs of the participating teachers, programs, and schools. With training, existing teaching personnel who have a sincere interest can implement the program.

financial requirements

Training materials (PEOPEL guides, manual, and assessment charts), $5 per participant. Training materials provide administrative and instructional guideline considerations for programming in physical education with trained student aides. Other materials and costs available upon request. Implementation costs based on teacher's salary at 30:1 student-to-teacher ratio. General physical education equipment used.

services available

Awareness materials are available at no cost. Visitors are welcome at project site any time by appointment. Project staff are available to attend out-of-state awareness meetings (costs to be negotiated). Training is conducted at project site (adopter pays only its own costs). Training is also available at adopter site (all expenses must be paid). Follow-up services are available to adopter.

contact

Ed Long, Director; Project PEOPEL; Phoenix Union High School System; 2526 W. Osborn Rd.;
Phoenix, AZ 85017. (602) ~~257-3034.~~ 251-3867

Developmental Funding: USOE ESEA Titles III and IV-C   JDRP No. 79-10   Approved: 3/28/79

Compiled Summer 1981

PROJECT

ISIS: Individualized Science Instructional System Dissemination Project

An interdisciplinary, modular science program preparing students who do not plan to major in postsecondary science to understand practical, real-world, science-related problems.

target audience

Approved by JDRP for science students of all abilities, grades 9-12. The program has been used in grades 7-8 and in health, social science, and physical education courses, but no evidence of effectiveness has been submitted to or approved by the Panel.

description

The program consists of 52 short, independent minicourses (34 of which currently have JDRP approval). The courses cover a broad range of topics of practical significance; they are intended to help students meet the diverse needs of today's world. Since the minicourses are independent, they can be used separately or grouped to form year-long courses in life science, general science, physical science, health, and environment science. Individual minicourses cover topics related to health, physical education, ecology, and social science as well as the traditional science areas. An accompanying teacher's manual can assist teachers in using individualized, small-group, or whole-class teaching methods.

Each minicourse is based on 15-20 learner objectives that were drafted at the beginning of the six-year development period by a panel of science educators, scientists, classroom teachers, parents, and students. A minicourse is normally completed by a student in three to four weeks (15-20 class periods). For every minicourse there is a test in two forms, and several minicourses have ancillary items such as cassette tapes, instructional games, atlases, maps, and wall charts. The reading level of the minicourses averages grade 8, as verified by the Fry Readability Graph. Remedial material on basic skills is also available.

Each minicourse, its accompanying test items, and all ancillary materials were reviewed for their science content at every stage of development and testing by at least two scholars considered to be experts in the content discipline. The materials were also reviewed by a panel from the National Congress of Parents and Teachers, who judged them for bias and appropriate treatment of sensitive issues.

Trial editions and revisions of the minicourses were used by more than 250 teachers with over 25,000 students in 750+ classrooms in 10 states. The schools were in urban, suburban, and rural areas and included a spectrum of racial and socioeconomic populations.

evidence of effectiveness

Thirty-three teachers and 1,468 high school students in seven states participated in the 1977-78 study of effectiveness, using tests developed by ISIS. Compared to control groups, project students demonstrated statistically and educationally significant gains.

implementation requirements

ISIS can be implemented in a variety of ways. A single minicourse can be used by a single student or an entire class to supplement an existing program, or minicourses can be grouped to form a one- to four-year complete science program. The equipment called for in the minicourses is usually available in school science laboratories. A few minicourses can be used outside a laboratory setting. Teachers who use the management manual generally need no more than two days of training to initiate the program.

financial requirements

Costs vary, depending on the minicourses chosen and the quantities requested. Since minicourse activities are usually completed in class, multiple classes can use one set of minicourses. The per-pupil cost for full-year installation compares favorably with single-textbook-based programs. Most ISIS materials are nonconsumable, so recurring costs are minimal.

services available

Awareness materials are available at no cost. Visitors are welcome any time by appointment at project site and additional demonstration sites in home state and out of state. Project staff are available to attend out-of-state awareness meetings (costs to negotiated). Training is conducted only at adopter site (all expenses must be paid). Implementation and follow-up services are available to adopters (all expenses must be paid).

contact

Ernest Burkman, Director; ISIS Dissemination Project; ESC, Inc.; P.O. Box 3792; Tallahassee, FL 32304. (904) 386-3176.

Developmental Funding: National Science Foundation

JDRP No. 79-11 Approved: 4/17/79

PROJECT

EVERY CHILD A WINNER With Movement Education

An individualized movement education program providing mainstreaming and success experiences for all children regardless of physical or mental ability.

target audience

Approved by JDRP for students grades K-6.

description

The program design provides developmental movement experiences for children centered on themes of space awareness, body awareness, quality of body movement, and relationships. These themes are taught through creative games, creative dance, and educational gymnastics. Competition is found in the program only when child-designed. The project slogan, "Every Child A Winner," finds expression through the discovery learning approach to teaching movement. Students are encouraged to reach their personal potential, and "winning" occurs as each child does his or her best.

Every Child A Winner -- Lesson Plans includes 31 behaviorally stated objectives, with lesson plans written to enable teachers to meet these objectives. Training is designed to help classroom teachers and physical educators implement the lessons. The lessons are designed to enhance the child's self-concept, to improve academic skills, and to cultivate physical fitness and motor skills.

Phase I Training (three days) includes an accountability model for program implementation, teaching techniques for Every Child A Winner movement lessons, and sessions on public relations related to successful implementation of the program. Phase II Training (two-day continuation) provides detailed information on refining students' movement skills and assistance in implementation in the upper grades.

The program should be implemented first in K-3, with a plan for expanding to K-6.

evidence of effectiveness

Evaluation was conducted on students grades 1-6 over a three-year period. Pre- and posttesting on a random sample included the Washington State Fitness Test, AAHPER Fitness Test, Minnesota Motor Skills Test, California Inventory of Personality, and the SRA Math and Reading Test. The data showed improvement in all areas, physical fitness and motor skill levels being elevated significantly ($p \leq .05$).

implementation requirements

Program can be conducted by classroom teachers and/or physical educators. Pupil-teacher ratio 1:30. Five-day training is essential, with a plan for additional inservice at the adopter site. Facilities needed are a multipurpose room or indoor area large enough for participation, as well as outdoor space to conduct movement lessons. Schedule of 30 minutes per day, five days per week. Equipment for each child beginning at kindergarten or K-3 from list supplied by project. Training materials and resource books are required. A signed agreement between the project director and adopter is required.

financial requirements

Training materials: one copy per training participant, Every Child A Winner...A Practical Approach to Movement Education, $7 each. Resource book list and equipment list supplied by project. Costs vary depending on number of students involved.

services available

Awareness materials are available at shared cost. Visitors are welcome any time by appointment at project site and additional demonstration sites in home state and out of state. Project staff are available to attend out-of-state awareness meetings (costs to be negotiated). Training is conducted at project site (costs to be negotiated). Training is also available at adopter site (costs to be negotiated). Implementation and follow-up services are available to adopters (costs to be negotiated).

contact

Martha F. Owens; Every Child A Winner; Irwin County Schools; Box 141; Ocilla, GA 31774.
(912) 468-7098.

Developmental Funding: USOE ESEA Title III

JDRP No. 74-60 Approved: 6/6/74

PROJECT

ACTIVE: All Children Totally InVolved Exercising

A diagnostic/prescriptive physical education program that provides teachers with the skills, strategies, and attitudes necessary to initiate a physical activity program for handicapped and normal individuals.

target audience

Approved by JDRP for handicapped, ages 6-60, nonhandicapped, grades K-9, physical education teachers, special education teachers, recreation teachers, and paraprofessionals. It has been used in other settings with pre-K and grades 10-12, but no evidence of effectiveness has been submitted to or approved by the Panel.

description

Project ACTIVE has been developed to serve handicapped individuals, but is equally applicable to slow learners and normal and gifted children. ACTIVE offers a training program to provide teachers with those skills/strategies necessary to implement an adapted physical education program, diagnostic/prescriptive curriculum manuals and materials addressed to the entire gamut of handicapped conditions, and consultant services to assist implementers during the installation phase. Program strengths include extreme flexibility for adoption/adaptation, a total curriculum package that can be implemented immediately at minimal cost, compliance with the federal mandate requiring "written education programs for the handicapped population," unlimited support services at no cost to enhance successful implementation, and accountability features to enhance administrator/community support. Student instruction is based on instruction format (i.e., the program is structured to ensure that trainees acquire the skills, knowledge, and attitudes stressed), with emphasis on trainee exposure to handicapped individuals in a field setting. Participants are trained to diagnose and assess pupil strengths and deficiencies and to prescribe motor, perceptual-motor, physical fitness, posture, nutrition, and diaphragmatic breathing tasks accordingly. ACTIVE has developed low motor ability, low physical vitality, postural abnormality, nutritional deficiency, and breathing problem components for mentally retarded, learning disabled, and emotionally disturbed student populations.

No special facilities are required. Comprehensive programs can be initiated in limited space. A 30' x 60' area removed from other teaching stations is ideal. If P.E. equipment is available, cost per school varies between $50 and $300. District commitment includes implementation of at least one aspect of the ACTIVE program in three or more classes that meet for a minimum of three 20-minute periods per week for one year, allocation of time for the trainee to train at least one staff member, and transmission of pre/post data and end-of-year evaluation report to project.

evidence of effectiveness

Testing of 80 teachers trained in 1973-74 on the Teacher-Cognitive-Psychomotor Test showed 80% mastery on 25 competencies. Pre- and post-testing of matched experimental and control groups at a six-month interval in 1973-74 on the Township of Ocean Motor Ability Test showed experimental groups' performance comparable to normal groups' performance and minimal gains for control group.

implementation requirements

Program may be implemented in a single class, a school, or an entire district. Five discrete curriculum components enable the district/agency to adapt the program to students with varying abilities in grades pre-K through 12. Training programs are adapted to comply with needs of the teachers and schools. Existing personnel can be used to obviate the need for additional staff (e.g., by inclusion of the ACTIVE program in the special education curriculum or by use of the team teaching approach). Instructional facilities may vary from 30' x 30' to 30' x 60'. Implementation schedule for each trainee must be submitted to project prior to training.

financial requirements

Complete training model kit (12 manuals and three packets of spirit masters), $64.50. (Kit manuals provide guidelines for planning an individualized-personalized physical education program for students with any type of handicap. Other supplementary materials are available. Unit orders are available and must be prepaid.) Installation costs are minimal. Personnel can be reassigned. Regular P.E. equipment can be used.

services available

Awareness materials are available at no cost. Visitors are welcome at project site two days per month between October and May and at additional demonstration sites in home state and out of state. Project staff are available to attend out-of-state awareness meetings (all expenses must be paid). Training is conducted at project site during the last two weeks of each month from October to May (adopter pays only its own costs plus cost of texts). Training is also available at adopter site (all expenses must be paid, including cost of texts for trainees). Implementation and follow-up services are available to adopters (all expenses must be paid).

contact

Thomas M. Vodola, Director; Project ACTIVE; Township of Ocean School District; Administration Building; 163 Monmouth Rd.; Oakhurst, NJ 07755. (201) 531-6600, ext. 365.

Developmental Funding: USOE ESEA Title III

JDRP No. 74-97 Approved: 9/18/74
3/19/78

PROJECT

SEQUENTIAL PHYSICAL EDUCATION REFORM: The M-5 Project

A logical, sequential, self-directed program in physical education that fosters knowledge about physical education and positive attitudes toward becoming and staying physically fit.

target audience

Approved by JDRP for students of all abilities, grades K-6.

description

The project's mission is to give students and their teachers knowledge about physical education and positive attitudes toward becoming and staying physically fit. Activities are built around major skill areas through the use of a variety of techniques that include specially designed learning centers and individualized learning activities.

The program endeavors to enable each child to develop physically, emotionally, socially, and mentally through the medium of physical activity. At the beginning of each school year, students are requested to complete a health appraisal form which aids teachers in recommending individual programs. As soon as the forms are returned, physical fitness testing begins, with each child being tested on the following skills: bench push-ups, curl-ups, squat-jumps, standing broad-jump, and the 30-yard dash. After testing, skill level needs are determined and the M-5 program begins.

All students visit six movement activity centers two days a week for approximately five minutes. The centers are designed to develop fitness and movement skills through sequential activities from lower to higher levels; as skills are developed, students progress to the next higher skill level, which allows students to gain the foundations needed in a logical and sequential manner. One day a week is spent in self-testing to determine improvement, the remaining two days in movement motivators: bean-bag activities, group and creative games, gymnastics, hoop activities, parachute activities, and yarn-ball activities. In addition, students are encouraged to be self-directive and to develop interest and proficiency in worthwhile recreational activities. It is expected that through this effort students will develop physically, emotionally, socially, and mentally as they engage daily in physical education.

evidence of effectiveness

Students were pre/posttested on the five-item Kirchner Fitness Test for Elementary School Children. Results of analysis of third-year pre/post data on project children revealed that over 91% achieved gains that were significant at the .01 level. Evaluation reports and JDRP application are available upon request.

implementation requirements

Obtaining Movement Activity Center Curriculum Card File; providing inservice staff development time for instructional workshop for classroom teachers and physical education staff; obtaining materials and equipment necessary for physical education activities. Beyond this point, only mutually agreeable aspects of adoption are involved, the extent of which must be determined by adopters.

financial requirements

The start-up costs for an average-size elementary school (500-600 students) are approximately $2,120 if everything on the equipment list and material list is purchased. These costs include $1,090 for materials and $850 for equipment. Potential adopters should examine the materials and equipment lists very carefully, since many of the items may already be available in the schools.

services available

Awareness materials are available at no cost. Visitors are welcome any time by appointment at project site and additional demonstration sites in home state and out of state. Project staff are available to attend out-of-state awareness meetings (costs to be negotiated). Training is conducted at project site (adopter pays only its own costs). Training is also available at adopter site (costs to be negotiated). Implementation and follow-up services are available to adopters (costs to be negotiated).

contact

Carolyn M. Morphy, Director; McBee Institute of Creative Education, Inc.; P.O. Box 1315; Marion, NC 28752. (704) 756-4871.

Developmental Funding: USOE ESEA Title IV-C JDRP No. 78-172 Approved: 5/31/78

Compiled Summer 1981

Individual Education Program in Physical Education (IEP/PE Model Program)

Developed by University Affiliated Facilities Program of the University of South Carolina in conjunction with the Department of Physical Education and the Department of Special Education

The Individual Education Program in Physical Education is a method of increasing the proficiency levels of special and physical education teachers in developing physical education components pertaining to the five basic motor movements, viz., throwing, jumping, kicking, catching, and running, for inclusion in the Individual Education Plans (IEPs) of handicapped children of any age, level or degree of handicap, who require an adaptive or specially designed physical education program. It was developed because there was no program designed to provide the training of special and physical education teachers in developing physical education components to the IEPs of handicapped students existing in South Carolina prior to its development. The intended users are special and physical education teachers in any school district in any state. Any handicapped child in the nation may be a prime beneficiary of the intervention. The intervention operates in the context of fulfilling P.L. 94-142, which requires that physical education components be included in the IEPs of handicapped children, when applicable.

Ms. Gay Clement, IEP/PE Coordinator
University of South Carolina
Benson Bldg.
Columbia, S.C. 29208
(803) 777-4839

I CAN Instructional Physical Education System

Developed by Janet A. Wessel, Michigan State University

I CAN is designed for use by physical education specialists and/or classroom teachers. Design specifications resulted in a program which: 1) provides for diagnostic-prescriptive teaching of students who range in ability from near zero competence to functional competence on a wide variety of physical performance skills and knowledges; 2) is responsive to the needs of local educational agencies either to develop a complete program or to supplement an already existing program; 3) is not dependent on sophisticated equipment and/or facilities; and 4) promotes user compliance with PL 94-142.

The system consists of two major components: 1) the teachers' Implementation Guide provides the information necessary to use the instructional system appropriately; and 2) the Instructional Resource Materials guide the systematic teaching of a large variety of independent physical education content.

The Implementation Guide includes: 1) program planning, 2) assessment of student status, 3) prescription of instruction based upon assessed needs, 4) implementation of teaching/learning activities associated with prescriptions, and 5) evaluation of the results of instruction.

The Instructional Resource Materials are divided into primary and secondary content areas. The primary and secondary Performance Objectives were selected and developed as instructional resource materials because they were judged by persons in physical education and special education to be important content for comprehensive physical education programming.

Janet A. Wessel, Ph.D.
Professor and Director
Field Service Unit
134 IM Circle Building
Michigan State University
East Lansing, Michigan 48824

(517) 355-4740

111

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Center for Education Statistics

2. Project/Activity Title High School and Beyond

3. Contact for further information:

Name George H. Brown

Title Survey Statistician

Street 1200 19th Street, NW

City Washington State DC Zip Code 20036

Telephone (301) 436-6688 until 2/25/83
Thereafter: (202) 254-7361

4. Category

x(?) a. Health Education (Information, Curriculum etc.)
____ b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination

5. Anticipated years of operation

____ a. Ongoing
____ b. FY 1983
____ c. FY 1984
X d. Other 1980, 1982, and at 2-yr intervals thereafter.
(describe)

6. Target Group

______a. Primary Grade Students
__x__b. Secondary Students
__x__c. College Students
______d. Faculty and staff
______e. Environmental
______f. Other __________________
(describe)

7. Brief description

See attached pages.

High School and Beyond (HS&B) is a longitudinal study of a nationally representative sample of high school students. It is being conducted by the National Center for Education Statistics within the U. S. Department of Education. Its primary purpose is to observe the educational and occupational plans and activities of young people as they pass through the American educational system and take on their adult roles.

Base-year data (using questionnaires and cognitive tests) were collected in spring 1980 from about 30,000 sophomores and 28,000 seniors in 1,015 public and private high schools across the nation. The first follow-up survey was conducted in spring 1982 and additional follow-ups, at two year intervals, are planned.

Although the topic of health was not an explicit focus of HS&B, the following health-related items of information can be gleaned from the base-year data:

(1) extent to which 1980 seniors had taken courses in (a) medical or dental assisting and (b) practical nursing

(2) plans for pursuing vocational education in (a) medical or dental assisting, and (b) practical nursing

(3) incidence of working for pay in a hospital or health field

(4) incidence of being "overweight" (self-report)

(5) extent to which students endorsed 12 items related to psychological health, such as

    (a) I take a positive attitude towards myself

    (b) I feel I am a person of worth, on an equal plane with others.

(6) plans for taking college courses in health occupations or health sciences.

(7) Percent of 10th grade and of 12th grade students who are in a health occupation instructional program. (principal's estimate)

(8) Percent of schools offering a course in Family life or Sex Education

(9) Percent of schools offering a Special Program for Pregnant Girls or Mothers

(10) Percent of schools providing special assistance to students with mental health problems

(11) Percent of schools with "No Smoking" rules

(12) Percent of schools in which principal considers students' use of drugs or alcohol to be a moderate or serious problem

The first follow-up survey of the seniors, two years after high school graduation, provides the following information:

(1) extent to which respondents pursued vocational education in medical or dental assisting and practical nursing

(2) extent of college study in health occupations, and health sciences

(3) use of hashish or marijuana

(4) use of cigarettes

(5) use of alcoholic beverages

As another part of the first follow-up, high school transcripts were obtained for about 18,000 high school graduates of 1982. Within a year or so, information will be available concerning the extent to which students took high school courses in health related fields.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Human Development Services
(information to be supplied later)

Public Health Service

Office of the Assistant Secretary for Health

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Agency Office of the Assistant Secretary for Health

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The Assistant Secretary for Health and Surgeon General serves as the Nation's chief health officer, with responsibility for programs and policies related to health services delivery, disease prevention and health promotion, and biomedical research. The offices involved with health and the schools are indicated below:

- The Office of Disease Prevention and Health Promotion (ODPHP) was established to coordinate policy and program development in prevention. In addition, the ODPHP sponsors innovative programs related to health promotion.
- The President's Council on Physical Fitness and Sports (PCPFS) works with State and local governments, schools and colleges, professional associations, sports organizations, and the private sector to promote participation in exercise and sports.
- The Office on Smoking and Health (OSH) has the long-range goal of reducing deaths, disabilities, and health care costs associated with cigarette smoking.
- The Office of Population Affairs is responsible for the overall planning, direction, coordination, monitoring, and evaluation of the population research and family planning service programs offered by various agencies in the Department of Health and Human Services.
- The National Center for Health Services Research (NCHSR) undertakes and supports research, demonstrations, and evaluations on problems in the organization, delivery, and financing of health care services. It also serves as the focal point for dissemination of health services research findings to public and private sector decisionmakers.
- National Center for Health Statistics (NCHS) is the principal Federal source of health data used in planning health services and other programs that meet the health needs of the Nation. Working with State and local governments, the Center collects and analyzes the vital statistics of the Nation and conducts surveys of illness and disability and the use and availability of health services, resources, and manpower.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Disease Prevention and Health Promotion

2. Project/Activity Title National Health Promotion Training Network

3. Contact for further information:

Name Susan Maloney

Title Public Affairs Specialist

Street ODPHP, Room 605, 300 7th St., SW

City Washington State DC Zip Code 20201

Telephone (202) 472-5660

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

___ a. Ongoing
X b. FY 1983
X c. FY 1984
___ d. Other ________ (describe)

6. Target Group

_____ a. Primary Grade Students
_____ b. Secondary Students
_____ c. College Students
_____ d. Faculty and staff
_____ e. Environmental
__X__ f. General Public
_____ g. Parents
_____ h. Other _____________ (describe)

7. Brief description

The American Red Cross, YMCA, National Urban League and COSSMHO (a coalition of Hispanic human services organizations) were awarded cooperative agreements in late 1981 to work with the Office of Disease Prevention and Health Promotion to introduce health promotion programs into their organization's. The first year of the project was devoted to surveys within the national organizations to determine current activities in health promotion and identify needs and priorities for health promotion projects. Year 02 will be devoted to developing specific activities which can be tested and disseminated to affiliates in year 03. The long range goal of the project is to make these organizations resources for health promotion programs at the local level.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Disease Prevention and Health Promotion

2. Project/Activity Title National Health Information Clearinghouse

3. Contact for further information:

Name Jory Barone, Associate Director

Title

Street P.O. Box 1133

City Washington State DC Zip Code 20013

Telephone (800) 336-4797; 703-522-2590 (in VA)

4. Category

[✓ a. Health Education (Information, Curriculum etc.)]
b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
d. Coordination

5. Anticipated years of operation

a. Ongoing
b. FY 1983
[✓ c. FY 1984]
d. Other ____________ (describe)

6. Target Group

______a. Primary Grade Students
______b. Secondary Students
______c. College Students
______d. Faculty and staff
______e. Environmental
___x__f. General Public
______g. Parents
___x__h. Other health Professional
(describe)

7. Brief description

The National Health Information Clearinghouse is an information and referral service designed to help consumers and health professionals locate health information. The NHIC is a service of the Office of Disease Prevention and Health Promotion of the U.S. Public Health Service.

When inquirers contact the NHIC with an information request, the Information Services Staff determines the resources that can best respond to the question. The resource is then asked to respond directly to the inquirer. The NHIC also produces resource guides on a variety of health and health-related topics for inquirers to use in locating additional resources. The NHIC staff can also assist health educators in locating resources and educational materials.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Disease Prevention and Health Promotion
Office of the Assistant Secretary for Health
Department of Health and Human Services

2. Project/Activity Title School Health Programs

3. Contact for further information:

Name Dr. Glen Gilbert

Title Coordinator, School Health Programs

Street 300 7th Street, S.W., Room 613

City Washington State D.C. Zip Code 20201

Telephone (202) 472-5308

4. Category

x a. Health Education (information, curriculum, etc.)
b. Health Services (immunizations, screenings, etc.)
c. Health School Environment (asbestos abatement, safe environment, etc.)
x d. Coordination

5. Anticipated years of operation

x a. Ongoing
b. FY 1983
c. FY 1984
d. Other ____________ (describe)

6. Target Group

a. Primary Grade Students
b. Secondary Students
c. College Students
x d. Faculty and Staff
e. Environmental
x f. General Public
x g. Parents
h. Other

7. Brief description

The school health programs branch, coordinates the ODPHP activities in school health education, school health services, promotion of a healthy school environment, and school physical education. The branch works cooperatively with other Federal agencies, State and local governments, business, industry, professional, and voluntary organizations in the prevention of disease, the maintenance of health and the promotion of sound health practices among the school age population.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Disease Prevention and Health Promotion

Office of the Assistant Secretary for Health

Department of Health and Human Services

[illegible] Project/Activity Title Objectives for the Nation

[illegible] Contact for further information:

Name Dr. Joel Kavet

Title ___

Street 300 7th Street, S.W., Room 613

City Washington State D.C. Zip Code 20201

Telephone (202) 472-5584

4. Category

___ a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
x d. Coordination

5. Anticipated years of operation

x a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ___ (describe)

6. Target Group

___ a. Primary Grade Students
___ b. Secondary Students
___ c. College Students
___ d. Faculty and Staff
___ e. Environmental
___ f. General Public
___ g. Parents
x h. Other Professionals (describe)

7. Brief description

Coordinating Public Health Service Activities associated with monitoring progress and implementing the health promotion and prevention measurable objectives for the Nation.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Disease Prevention and Health Promotion
Office of the Assistant Secretary for Health
Department of Health and Human Services

2. Project/Activity Title National Youth Fitness Study

3. Contact for further information:

Name Dr. Glen Gilbert

Title Coordinator, School Health Programs

Street 300 7th Street, S.W., Room 613

City Washington State D.C. Zip Code 20201

Telephone (202) 472-5308

4. Category

x a. Health Education (information, curriculum, etc.)
______ b. Health Services (immunizations, screenings, etc.)
______ c. Health School Environment (asbestos abatement, safe environment, etc.)
______ d. Coordination

5. Anticipated years of operation

______ a. Ongoing
x b. FY 1983
x c. FY 1984
______ d. Other ______________ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
______ c. College Students
______ d. Faculty and Staff
______ e. Environmental
______ f. General Public
______ g. Parents
______ h. Other

7. Brief description

An evaluation of the physical fitness and activity patterns of American youth ages 10-17. A national sample of American youth will be given physical fitness tests and a questionnaire of activities related to physical fitness. The pilot study will be conducted in spring 83 and the national data will be collected in spring 84.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Disease Prevention and Health Promotion
Office of the Assistant Secretary for Health
Department of Health and Human Services

2. Project/Activity Title Identification of Computer Software in Health Promotion

3. Contact for further information:

Name Dr. Glen Gilbert

Title Coordinator, School Health Programs

Street 300 7th Street, S.W., Room 613

City Washington State D.C. Zip Code 20201

Telephone (202) 472-5308

4. Category

x a. Health Education (information, curriculum, etc.)
__ b. Health Services (immunizations, screenings, etc.)
__ c. Health School Environment (asbestos abatement, safe environment, etc.)
__ d. Coordination

5. Anticipated years of operation

x a. Ongoing
__ b. FY 1983
__ c. FY 1984
__ d. Other ____ (describe)

6. Target Group

__ a. Primary Grade Students
__ b. Secondary Students
__ c. College Students
__ d. Faculty and Staff
__ e. Environmental
__ f. General Public
__ g. Parents
x h. Other Professionals (describe)

7. Brief description

Through the National Health Information Clearinghouse, ODPHP maintains a list of available computer software in the health area. No evaluation is made of the software. A copy of the listing may be obtained from the NHIC (703) 522-2590.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Population Affairs, OASH, HHS

2. Project/Activity Title Voluntary Family Planning Programs

3. Contact for further information:

Name Susan Rudy

Title Information and Education Coordinator, Officer of Population Affairs

Street Reporters Building, 300 7th Street, S.W., Room 612

City Washington State D.C. Zip Code 20201

Telephone (202) 472-5194

4. Category

x a. Health Education (information, curriculum, etc.)
x b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
___ d. Coordination

5. Anticipated years of operation

x a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ___ (describe)

6. Target Group

___ a. Primary Grade Students
x b. Secondary Students
x c. College Students
___ d. Faculty and Staff
___ e. Environmental
x f. General Public
x g. Parents
x h. Other*

*All individuals desiring family planning services who are unable to obtain such services, with priority given to low income individuals

7. Brief description

Under Title X of the Public Health Service Act, the basic mission of the family planning program is to facilitate the provision of comprehensive family planning services to people who want and need them but cannot afford them. The program is designed to provide educational, counseling, comprehensive medical and social services necessary to enable individuals to freely determine the number and spacing of their children, and by doing so, help to reduce maternal and infant mortalty, and promote the health of mothers and children.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office of Population Affairs, OASH, HHS

2. Project/Activity Title Adolescent Family Life Demonstration Projects

3. Contact for further information:

Name Susan Rudy

Title Information and Education Coordinator, Office of Population Affairs

Street Reports Building, 300 7th Street, S.W., Room 612

City Washington State D.C. Zip Code 20201

Telephone (202) 472-5194

4. Category

a. Health Education (information, curriculum, etc.)
[✓ b. Health Services (immunizations, screenings, etc.)]
c. Health School Environment (asbestos abatement, safe environment, etc.)
d. Coordination

5. Anticipated years of operation

[✓ a. Ongoing]
b. FY 1983
c. FY 1984
d. Other (describe)

6. Target Group

a. Primary Grade Students
[✓ b. Secondary Students]
c. College Students
d. Faculty and Staff
e. Environmental
f. General Public
[✓ g. Parents]
h. Other

7. Brief description

The Adolescent Family Life program is designed to provide models for communities around the country to demonstrate effective care services for pregnant adolescents and adolescent parents and prevention services to reach young people before they become sexually active. Located in 38 states, the grant projects include 50 demonstration programs in which the federal government provides initial funding to help eligible public and private non-profit agencies develop and evaluate services either directly or through linkages with other appropriate agencies. The community provides matching funds amounting to at least 30 percent of the cost of the project. The demonstration projects stress family involvement to help prevent teenage pregnancy and deal with the strains of adolescent parenting; care services for pregnant adolescents and adolescent parents, with emphasis on adoption as an alternative; and prevention services relating to problems associated with adolescent premarital sexual relations.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency President's Council on Physical Fitness and Sports

2. Project/Activity Title Coordinator of Federal Activities Related to Physical Fitness and Sports in Schools

3. Contact for further information:

Name Dr. Glenn Swergros

Title Director, Federal-State Relations

Street 450 5th Street, N.W.

City Washington State D.C. Zip Code 20001

Telephone (202) 272-3427

4. Category

____ a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
x d. Coordination

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
x c. College Students
x d. Faculty and Staff
____ e. Environmental
x f. General Public
x g. Parents
x h. Other Professionals (describe)

7. Brief description

The PCPFS was established in 1956 as the President's Council on Youth Fitness, and its responsibilities were expanded to include the adult population in 1963. The agency works with State and local governments, schools and colleges, professional associations, sports organizations, and the private sector to promote participation in exercise and sports. Specific programs include technical assistance to various organizations, public service campaigns, promoting physical activity, regional leadership training workshops, awards to youth for outstanding physical achievement, and publication of research information. In 1980, the President instructed the PCPFS to concentrate on promoting daily physical education programs in the schools; establishing Governor's Councils on Physical Fitness and Sports in all 50 States: urging employers to establish employee fitness programs; and encouraging all Federal departments and agencies to support physical fitness programs for their personnel.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Center for Health Statistics

2. Project/Activity Title National Survey of Personal Health Practices and Consequences

3. Contact for further information:

Name Mr. Ronald W. Wilson

Title Director, Division of Epidemiology and Health Promotion
National Center for Health Statistics
Street FCB2, Room 2-27
3700 East-West Highway
City Hyattsville State Maryland Zip Code 20782

Telephone (301) 436-7032

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

___ a. Ongoing
___ b. FY 1983
___ c. FY 1984
X d. Other 1979-1980 (describe)

6. Target Group

_____ a. Primary Grade Students
_____ b. Secondary Students
_____ c. College Students
_____ d. Faculty and staff

__X__ e. Environmental
__X__ f. General Public
__X__ g. Parents
_____ h. Other _____________ (describe)

7. Brief description

The NSPHPC was a comprehensive survey of the health practices of adult men and women, 20 to 64 years of age. Since respondents in telephone households with children or youth can be identified as a group, the data source has potential use in describing the health practice profiles of adults living with school-age children and youth.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Center for Health Statistics

2. Project/Activity Title National Health Interview Survey

3. Contact for further information:

Name Mr. Robert Fuchsberg

Title Director, Division of Health Interview Statistics
National Center for Health Statistics

Street FCB2, Room 2-28
3700 East-West Highway

City Hyattsville State Maryland Zip Code 20782

Telephone (301) 436-7085

4. Category

☐ a. Health Education (Information, Curriculum etc.)
☒ b. Health Services (Immunizations, Screenings etc.)
☐ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
☐ d. Coordination

5. Anticipated years of operation

☒ a. Ongoing
☐ b. FY 1983
☐ c. FY 1984
☒ d. Other 1980 Child Health Survey
(describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
x c. College Students
____ d. Faculty and staff

____ e. Environmental
x f. General Public
____ g. Parents
____ h. Other ____________ (describe)

7. Brief description

Major source of national data on acute illnesses and injuries, days missed from school, chronic conditions and impairments, utilization of physicians, dentists, and short-stay hospitals. In selected years, detailed information has been collected on the health of children and youths (e.g., in 1980, the NHIS included a detailed Child Health Supplement).

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Center for Health Statistics

2. Project/Activity Title National Health and Nutrition Examination Survey

3. Contact for further information:

Name Mr. Robert Murphy

Title Director, Division of Health Examination Statistics
National Center for Health Statistics

Street FCB2, Room 2-58
3700 East-West Highway

City Hyattsville State Maryland Zip Code 20782

Telephone (301) 436-7068

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
X c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

___X___ a. Primary Grade Students
___X___ b. Secondary Students
___X___ c. College Students
______ d. Faculty and staff

______ e. Environmental
___X___ f. General Public
___X___ g. Parents
______ h. Other ____________ (describe)

7. Brief description

The Health Examination Statistics program collects physiological measurements of health status on national samples of the population. The second and third cycles of this program have focused, respectively, on children 6 to 11, and in youths 12 to 17 years of age. NHANES I collected nutritional information on children and youth, as well as on adults up through age 74. The NHANES II collected information on the nutritional and health status of persons 6 months up to age 74.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office on Smoking and Health

2. Project/Activity Title Public Service Campaign on Smoking and Health

3. Contact for further information:

Name Robert Hutchings

Title Associate Director

Street Rm. 1-10 Park Bldg.

City Rockville State MD Zip Code 20857

Telephone (301) 443-5287

4. Category

XX a. Health Education (Information, Curriculum etc.)
b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
d. Coordination

5. Anticipated years of operation

XX a. Ongoing
b. FY 1983
c. FY 1984
d. Other (describe)

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6. Target Group

XX a. Primary Grade Students
XX b. Secondary Students
XX c. College Students
_____ d. Faculty and staff
_____ e. Environmental
XX f. General Public
_____ g. Parents
_____ h. Other __________ (describe)

7. Brief description

Continuing series of public service advertisements for radio and television, targeted at encouraging children and teenagers not to take up smoking, informing women about the hazards of smoking during pregnancy, educating smokers who can't quit how to smoke with less hazard.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office on Smoking and Health

2. Project/Activity Title "Tobacco, Smoking and Health: A Fact Book"

3. Contact for further information:

Name Judy Murphy

Title Public Information Specialist

Street Rm 1-10 Park Bldg.

City Rockville State MD Zip Code 20857

Telephone (301) 443-5287

4. Category

XX a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

XX a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

14;

6. Target Group

____ a. Primary Grade Students
XX b. Secondary Students
XX c. College Students
XX d. Faculty and staff
____ e. Environmental
XX f. General Public
____ g. Parents
____ h. Other ____________ (describe)

7. Brief description

Pamphlet covering a number of issues, including health risks, demographics of smoking, tobacco growing, cigarette manufacturing, tobacco imports and exports.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office on Smoking and Health

2. Project/Activity Title "Why People Smoke Cigarettes"

3. Contact for further information:

Name Judy Murphy

Title Public Information Specialist

Street Rm. 1-10 Park Bldg.

City Rockville State MD Zip Code 20857

Telephone (301) 443-5287

4. Category

XX a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

XX a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

149

6. Target Group

____ a. Primary Grade Students
____ b. Secondary Students
XX c. College Students
XX d. Faculty and staff
____ e. Environmental
XX f. General Public
XX g. Parents
XX h. Other Health Prof. (describe)

7. Brief description

A short pamphlet characterizing cigarette smoking as a drug dependence and more than just a bad habit. Discusses the role of nicotine in maintaining dependence. Gives recommendations on quitting, such as seeking the support of family and friends.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Office on Smoking and Health

2. Project/Activity Title Teenage Cigarette Smoking Self Test

3. Contact for further information:

Name Judy Murphy

Title Public Information Specialist

Street Rm. 1-10 Park Bldg.

City Rockville State MD Zip Code 20857

Telephone (301) 443-5287

4. Category

XX a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

XX a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ______ (describe)

6. Target Group

____ a. Primary Grade Students
XX b. Secondary Students
____ c. College Students
____ d. Faculty and staff
____ e. Environmental
____ f. General Public
____ g. Parents
____ h. Other ____________ (describe)

7. Brief description

A series of short tests for teens, printed on duplicating masters, which help teenagers evaluate their feelings and attitudes about smoking. The booklet includes a discussion leader's guide and a short discussion of the health risks associated with smoking.

Alcohol, Drug Abuse, and Mental Health Administration

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by February 24, 1983.

Agency ADAMHA

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The mission of the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) is to provide a national focus for the Federal effort to increase knowledge and promote effective strategies to deal with health problems and issues associated with the use and abuse of alcohol and drugs, and with mental illness and mental health.

To accomplish this mission, the Administration conducts programs of research, training, prevention, information, and education. The Administration provides program expertise and technical assistance in responding to Federal, State, local or private organizations on matters related to their alcohol, drug abuse, and mental health matters.

With respect to prevention, ADAMHA provides a national focus for the Federal effort to increase knowledge and promote effective strategies to deal with health problems and issues associated with use and abuse of alcohol and drugs, and with mental illness and mental health. In carrying out these responsibilities the Administration: (1) conducts and supports research on the delivery of alcoholism, drug abuse, and mental health treatment and prevention services; and (2) collaborates with, provides assistance to, and encourages other Federal agencies, national, foreign, State and local organizations, hospitals, and voluntary groups to facilitate and expand programs for the prevention and treatment of alcohol, drug abuse, and mental health problems.

Activities to carry out this mission are supported and conducted by the National Institute on Alcohol Abuse and Alcoholism, the National Institute on Drug Abuse and the National Institute of Mental Health.

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by February 24, 1983.

Agency ADAMHA, NIMH

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The mission of the National Institute of Mental Health includes promotion of mental health. Therefore a number of child and youth related activities of the Institute are relevant to school health promotion (The Ninth Annual Report on the Child and Youth Activities of the National Institute of Mental Health attached).

Within the Institute, the Mental Health Education Branch (MHEB) has major responsibility for fostering educational programs for the general public and for selected professional audiences interested in mental health issues. Staff members produce educational materials in a variety of print, audiovisual, and electronic media; design and use systems for distribution, promotion, and marketing of the materials; and provide assistance to local community education programs in mental health.

School personnel, students, and their families, and community caregivers who work with schools are important audiences for the MHEB. A number of flyers and booklets have been produced for teachers and parents, and an audiovisual curriculum for 9-to-12 year olds is distributed through the National Audiovisual Center.

In 1983 the MHEB is initiating new projects and materials on adolescence and on mental health in secondary schools.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ADAMHA, National Institute of Mental Health

2. Project/Activity Title "Being Friends"--mental health education curriculum for 9- to 12-year olds

3. Contact for further information:

Name Mary Ellen Quick

Title Technical Information Specialist

Street 5600 Fishers Lane, Room 15-81

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-4573

4. Category

x a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
____ d. Coordination

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

x a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
____ d. Faculty and Staff
____ e. Environmental
____ f. General Public
____ g. Parents
____ h. Other

7. Brief description

This is a series of 5 audiovisual shows (each is 6 minutes long) with a discussion guide for each. The dramatic vignettes illustrate the pleasures and problems of preadolescent youngsters' relationships with younger children, peers, teenagers, adults, and the elderly. Each audiovisual includes original music lyrics underscore the theme of the show; songs are printed in the discussion guides.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ADAMHA, National Institute of Mental Health

2. Project/Activity Title Adolescence and Stress--monograph

3. Contact for further information:

Name Anne Rosenfeld

Title Chief, Science Reports Branch

Street 5600 Fishers Lane, Room 15-99

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-4533

4. Category

☒ a. Health Education (information, curriculum, etc.)
☐ b. Health Services (immunizations, screenings, etc.)
☐ c. Health School Environment (asbestos abatement, safe environment, etc.)
☐ d. Coordination

5. Anticipated years of operation

☒ a. Ongoing
☐ b. FY 1983
☐ c. FY 1984
☐ d. Other ________ (describe)

6. Target Group

☐ a. Primary Grade Students
☐ b. Secondary Students
☐ c. College Students
☒ d. Faculty and Staff
☐ e. Environmental
☐ f. General Public
☐ g. Parents
☒ h. Other Mental Health Workers (describe)

7. Brief description

Adolescence and Stress is a report of the Conference on Research Directions for Understanding Stress Reactions in Adolescence, sponsored by the National Institute of Mental Health in September 1980.

Major sections of the monograph are:

- Individual development: Its significance for stress responsivity and stress adaptation.
- Major factors acting on the early adolescent.
- Current research and conceptualizations on stress responsivity.
- Growing up vulnerable and growing up resistant: Two longitudinal studies.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ADAMHA, National Institute of Mental Health

2. Project/Activity Title Adolescent Depression--an information packet for the television industry

3. Contact for further information:

Name Dorothy A. Kinzey

Title Psychologist

Street 5600 Fishers Lane, Room 15-81

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-4573

4. Category

x a. Health Education (information, curriculum, etc.)
b. Health Services (immunizations, screenings, etc.)
c. Health School Environment (asbestos abatement, safe environment, etc.)
d. Coordination

5. Anticipated years of operation

x a. Ongoing
b. FY 1983
c. FY 1984
d. Other (describe)

The material is now being developed--with an aim toward publication in summer of 1983.

6. Target Group

a. Primary Grade Students
b. Secondary Students
c. College Students
x d. Faculty and Staff
e. Environmental
f. General Public
g. Parents
x h. Other TV industry Mental health workers (describe)

7. Brief description

This information packet--comprising 10 research summaries plus bibliographic references and referrals to experts--is designed for use by TV writers, producers, and others who create news and entertainment shows. Based on experience with other packets in the series, however, these materials are useful for health educators, teachers, and others who deal with adolescents.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ADAMHA, National Institute of Mental Health

2. Project/Activity Title Plain Talk--series of flyers

3. Contact for further information:

Name Ruth Kay

Title Technical Information Specialist

Street 5600 Fishers Lane, Room 15-81

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-4573

4. Category

☒ a. Health Education (information, curriculum, etc.)
☐ b. Health Services (immunizations, screenings, etc.)
☐ c. Health School Environment (asbestos abatement, safe environment, etc.)
☐ d. Coordination

5. Anticipated years of operation

☒ a. Ongoing
☐ b. FY 1983
☐ c. FY 1984
☐ d. Other ______________ (describe)

When Your Child First Goes Off to School
The Angry Child
Learning Disabilities
Adolescence

6. Target Group

☐ a. Primary Grade Students
☐ b. Secondary Students
☐ c. College Students
☒ d. Faculty and Staff
☐ e. Environmental
☒ f. General Public
☒ g. Parents
☐ h. Other

7. Brief description

The Plain Talk series is part of the NIMH education program aimed at preventing mental illness and promoting mental health. It is intended to inform the general public about a variety of everyday problems and/or interpersonal relationships which may contribute to development of mental illness, and to offer suggestions on how to deal with problems to avoid such consequences. Topics covered include:

- When Your Child First Goes Off to School
- The Angry Child
- Learning Disabilities
- Adolescence

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ADAMHA, National Institute of Mental Health
2. Project/Activity Title Mental Health in the Schools--a training curriculum
3. Contact for further information:

Name Joan Houghton

Title Psychologist (Education)

Street 5600 Fishers Lane, Room 15-81

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-4573

4. Category

x a. Health Education (information, curriculum, etc.)
__ b. Health Services (immunizations, screenings, etc.)
__ c. Health School Environment (asbestos abatement, safe environment, etc.)
__ d. Coordination

5. Anticipated years of operation

__ a. Ongoing
__ b. FY 1983
x c. FY 1984
__ d. Other ____ (describe)

6. Target Group

__ a. Primary Grade Students
__ b. Secondary Students
__ c. College Students
x d. Faculty and Staff
__ e. Environmental
__ f. General Public
__ g. Parents
x h. Other CMCH professionals (describe)

164

7. Brief description

The Mental Health Education Branch and The Staff College are collaborating on the design of a training curriculum related to mental health in the schools. Initial planning efforts suggest that training in school mental health consultation for mental health professionals is needed, as is training for school counselors in school mental health service development.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ADAMHA, National Institute of Mental Health

2. Project/Activity Title Mental Health Program at Herndon High School, Herndon, VA--a collaborative project of NIMH and Fairfax County Public Schools

3. Contact for further information:

Name Joan Houghton & Charles Rembold

Title Psychologists (Education)

Street 5600 Fishers Lane, Room 15-81

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-4573

4. Category

x a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
____ d. Coordination

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

____ a. Primary Grade Students
x b. Secondary Students
____ c. College Students
____ d. Faculty and Staff
____ e. Environmental
____ f. General Public
____ g. Parents
____ h. Other

7. Brief description

In 1978 Herndon High School initiated a comprehensive program of mental health services for students, school staff, and families. The program components include:

- Peer Counseling Training Program
- Case Management Seminars
- Adapted Physical Education
- Development Career Education Program
- Student Seminars
- Staff Development Program
- The Center for Academically Unsuccessful Students
- PROJECT FRIEND--(An extra curricular club for isolated and alienated youth)

One unique aspect of the Herndon High School program is that it has developed this undertaking with no additional staff or funding by drawing on existing resources--school and community.

Projects now being replicated in other schools in Fairfax County Public School system.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ADAMHA, National Institute of Mental Health

2. Project/Activity Title Caring About Kids--series of booklets

3. Contact for further information:

Name Ruth Kay

Title Technical Information Specialist

Street 5600 Fishers Lane, Room 15-81

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-4573

4. Category

x a. Health Education (information, curriculum, etc.)
b. Health Services (immunizations, screenings, etc.)
c. Health School Environment (asbestos abatement, safe environment, etc.)
d. Coordination

5. Anticipated years of operation

x a. Ongoing
b. FY 1983
c. FY 1984
d. Other (describe)

Dyslexia
The Hyperactive Child
Talking to Children About Death
When Parents Divorce
Learning While Growing (Cognitive Development)
The Importance of Play

6. Target Group

a. Primary Grade Students
b. Secondary Students
c. College Students
x d. Faculty and Staff
e. Environmental
x f. General Public
x g. Parents
h. Other

7. Brief description

The CARING ABOUT KIDS series is part of the NIMH education program aimed at preventing mental illness and promoting mental health. It is intended to provide parents, potential parents, and others who care for children with information that will help promote good mental health. Topics covered include:

- Dyslexia
- The Hyperactive Child
- Talking to Children About Death
- When Parents Divorce
- Learning While Growing (Cognitive Development)
- The Importance of Play

FORM A

Information requested for "Interagency Meeting on Health Promotion
Through the Schools." Please return by February 15, 1983.

Agency National Institute on Alcohol Abuse and Alcoholism

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

NIAAA research strongly supports the hypothesis that education of young people, through the schools, and involving parents and the community, is one of the most successful strategies for preventing alcohol abuse an alcohol-related problems.

NIAAA's mandate serves as a national resource for the collection, analysis, and dissemination of scientific findings and improved methods of alcoholism prevention and treatment services; and supports public education activities to inform the public of the risks and consequences associated with alcohol abuse and alcoholism.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute on Alcohol Abuse and Alcoholism

2. Project/Activity Title Whole College Catalog on Drinking

3. Contact for further information:

Name Leslie C. Gray, Jr.

Title Public Health Advisor, Prevention Branch, NIAAA

Street 5600 Fishers Lane, Room 16C-06

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-3860

4. Category

x a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
x c. Health School Environment (asbestos abatement, safe environment, etc.)
____ d. Coordination

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

____ a. Primary Grade Students
____ b. Secondary Students
x c. College Students
x d. Faculty and Staff
____ e. Environmental
____ f. General Public
____ g. Parents
____ h. Other

7. Brief description

The Whole College Catalog on Drinking (which is currently being updated) provides ideas and program concepts for alcohol abuse prevention programs on college campuses. It covers needs assessment and planning, implementation, resources, evaluation, intervention and referral, project ideas, personal and environmental strategies, and examples of training programs and courses, media materials, facts, and recipes.

Promotion of the Catalog and prevention programs for college-age students is handled by Institute and National Clearinghouse for Alcohol Information staff.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute on Alcohol Abuse and Alcoholism

2. Project/Activity Title Alcohol Abuse Prevention in the Schools

3. Contact for further information:

Name Leslie C. Gray, Jr.

Title Public Health Advisor, Prevention Branch, NIAAA

Street 5600 Fishers Lane, Room 16C-06

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-3860

4. Category

x a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
___ d. Coordination

5. Anticipated years of operation

x a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other __________ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
___ c. College Students
x d. Faculty and Staff
___ e. Environmental
x f. General Public
x g. Parents
___ h. Other

7. Brief description

A comprehensive program to promote the implementation or expansion of alcohol abuse prevention programs (including curricula, teacher training, parent group support, peer counseling, community public education campaigns, alcohol control policies, and student assistance programs, involving schools, parents, and the community. Regional conferences were held; "Prevention Plus: Involving Schools, Parents, and the Community in Alcohol and Drug Abuse Education," (a guide to exemplary models) was produced; and technical assistance is provided. This ongoing promotion effort grew out of NIAAA, NIDA, and CDC research programs designed to identify and replicate model alcohol and drug abuse prevention programs used within school systems. The models promoted were evaluated and replicated. The public education campaign strategies are based on NIAAA's successful campaign directed toward women and youth. The school and other control policies were supported by grants from NIAAA and the Department of Justice as well as the State Departments of Education in Maryland and Pennsylvania. The student assistance models were developed through grants from NIAAA and State offices.

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by February 24, 1983.

Agency National Institute on Drug Abuse

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The National Institute on Drug Abuse has the responsibility for (1) conducting basic and applied research in relationship to a variety of substances and a variety of settings; (2) communicating findings to Federal, State, local agencies and institutions and to the public, and (3) working collaboratively with different organizations to implement effective programs based on these findings. Much of the research has implications for the school settings, including surveying high school seniors regarding drug use and attitudes towards use, determining how and why drug use affects learning, determining which drug prevention curricula are effective. NIDA has collaborated with other agencies to ascertain what school policies are in place regarding drug and alcohol use. Through its technical assistance projects, NIDA has worked closely with schools, parents, communities and voluntary organizations to implement effective strategies and develop training packages. Recently there has been considerable study of peer resistance approaches to drugs, alcohol and smoking.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 24, 1983.

Please type or print - reproduce these forms as many times as necessary

1. **Agency** Prevention Branch, Division of Prevention and Communications National Institute on Drug Abuse

2. **Project/Activity Title** Pyramid Project

3. Contact for further information:

Name Stephen E. Gardner, D.S.W.

Title Supervisory Public Health Analyst Pyramid Project

Street 5600 Fishers Lane, Room 11A33

City Rockville, State Maryland Zip Code 20857

Telephone (301) 443-2450

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

176

6. **Target Group**

X a. Primary Grade Students
X b. Secondary Students
X c. College Students
X d. Faculty and staff
X e. Environmental
X f. General Public
X g. Parents
X h. Other ____________ (describe)

7. Brief description

The Pyramid Project provides expert drug abuse prevention consultation to schools, communities, parents, as well as Federal, State, local government and national organizations/associations. NIDA, through this project, sponsors workshops and meetings that typically involve school strategies and educational personnel.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute on Drug Abuse

2. Project/Activity Title Drug Abuse Prevention Research

3. Contact for further information:

Name Robert Battjes, DSW

Title Chief, Prevention Research Branch
National Institute on Drug Abuse

Street 5600 Fishers Lane, Room 10A-16

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1514

4. Category

x a. Health Education (information, curriculum, etc.)
__ b. Health Services (immunizations, screenings, etc.)
__ c. Health School Environment (asbestos abatement, safe environment, etc.)
__ d. Coordination

5. Anticipated years of operation

x a. Ongoing
__ b. FY 1983
__ c. FY 1984
__ d. Other ________ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
x c. College Students
x d. Faculty and Staff
__ e. Environmental
x f. General Public
x g. Parents
__ h. Other

178

7. Brief description

Research is conducted to develop and determine the effectiveness of prevention intervention approaches utilized in various settings, including schools. Research is also conducted to identify peronality, interpersonal, and environmental factors which increase individuals' risk of drug abuse in order to understand the onset of drug abuse and guide the development of intervention programs.

Centers for Disease Control

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Centers for Disease Control, Division of Health Education

2. Project/Activity Title PRIMARY GRADES HEALTH CURRICULUM PROJECT

(A Companion Project to the School Health Curriculum Project, grades 4-6)

3. Contact for further information:

Name Roy L. Davis

Title Chief, School Health and Special Projects

Street 1600 Clifton Road

City Atlanta State Georgia Zip Code 30333

Telephone (404) 329-2829

4. Category

- x a. Health Education (information, curriculum, etc.)
- ___ b. Health Services (immunizations, screenings, etc.)
- ___ c. Health School Environment (asbestos abatement, safe environment, etc.)
- ___ d. Coordination

5. Anticipated years of operation

- x a. Ongoing
- ___ b. FY 1983
- ___ c. FY 1984
- ___ d. Other ________ (describe)

6. Target Group

- x a. Primary Grade Students
- ___ b. Secondary Students
- ___ c. College Students
- x d. Faculty and Staff
- ___ e. Environmental
- ___ f. General Public
- ___ g. Parents
- ___ h. Other

7. Brief description

GOALS: To teach students about their senses, their bodies and good health habits.

To help student learn how their personal choices affect their health.

To integrate classroom learning activities with other life situations.

To offer students and teachers an experience-based understanding of the physical, mental, social and emotional dimensions of their own health.

DESCRIPTION:

The Primary Grades Health Curriculum Project (PGHCP) provides students with an awareness of their bodies and helps them feel good about themselves as individuals. In Kindergarten, students are introduced to their five senses, feelings and general health habits in the "Happiness is Being Healthy" unit. The first grade unit, "Super Me" expands on the senses of touch, taste and smell and their role in communicating, emphasizes individuality and explores the issue of self-concept. "Sights and Sounds," the second grade unit, emphasizes the emotions and further explores how sight and sound are used to communicate. In third grade, students study the skeletal and muscular systems and ways in which health is influenced by the environment in "The Body, Its Framework and Movement."

The teaching/learning methods in the PGHCP are varied. Examples include small-group learning stations utilizing experimental activities, the use of multi-media activities and field trips, and the involvement of parents and various community health personnel. Other subject areas such as reading, writing, arithmetic, art and drama are integrated into the health-centered learning activities.

Currently, the PGHCP is being implemented by over 2000 teachers in 26 states.

MATERIALS AND IMPLEMENTATION REQUIREMENTS:

Materials for the PGHCP include curriculum guides for teachers and students, films, filmstrips, slides, overhead transparencies, games, puppets and models.

The training component involves teachers, administrators and other school personnel in active participatory workshops. The training team participates in PGHCP activities while learning about the health content, teaching strategies and resources. A team is generally composed of 10 persons: two classroom teachers from each grade level, the principal and one or more school support persons (school nurse, librarian, media/library specialist, health educator, curriculum director).

The team is responsible for lateral spread training to other teachers in the district.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Centers for Disease Control, Division of Health Education

2. Project/Activity Title Teenage Health Teaching Modules Project

3. Contact for further information:

Name Beth Layson

Title Office of School Health and Special Projects, CDC
CHPE--Health Education Division

Street 1600 Clifton Road

City Atlanta State Georgia Zip Code 30333

Telephone (404) ____________

4. Category

x a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
____ d. Coordination

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

____ a. Primary Grade Students
x b. Secondary Students
____ c. College Students
x d. Faculty and Staff
____ e. Environmental
____ f. General Public
x g. Parents
____ h. Other

Brief Description

Work on the THTM project is being conducted under contract with the Education Development Center in Newton, Massachusetts. The basic purpose has been to develop, test, disseminate information about, and encourage adoption and diffusion of 16 health education modules for junior and senior high school aged youth and the teachers who work with them. A multidisciplinary advisory committee has been involved; and every attempt has been made to utilize the many health education resources that have been developed and are available from other national organizations. Content covers both the generally accepted health education areas as well as contemporary issues of concern to pupils, teachers, parents, public health, etc. The modules may be used as a total package and serve as a general survey course in health education or individually. They have also been developed for use in various curriculum subject areas.

The modules have been subjected to technical review by a variety of experts and field tested in 64 schools in 40 cities or towns in 10 states. Local support for further training and diffusion of the THTM is already developing in several parts of the country. The National Institute for Heart, Lung and Blood Disease through an interagency agreement with CDC and technical assistance has made possible the development of one of the modules - "Using New Health Research." FY '83 activities will involve nationwide showcasing the THTM and stimulating its use.

Inquiries should be directed to the Health Education Division as noted above.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Center for Health Promotion and Education, CDC

2. Project/Activity Title Teen Health Risk Appraisal

3. Contact for further information:

Name Martha Hargraves

Title Public Health Advisor

Street Centers for Disease Control, Building 3, 1600 Clifton Road

City Atlanta State Georgia Zip Code 30333

Telephone (404) 329-3452

4. Category

x a. Health Education (information, curriculum, etc.)
b. Health Services (immunizations, screenings, etc.)
c. Health School Environment (asbestos abatement, safe environment, etc.)
d. Coordination

5. Anticipated years of operation

a. Ongoing
x b. FY 1983--Development
x c. FY 1984--Limited Field Application Testing
x d. Other--FY 1985 Additional Development and Dissemination
(describe)

6. Target Group

a. Primary Grade Students
x b. Secondary Students
c. College Students
d. Faculty and Staff
e. Environmental
f. General Public
g. Parents
h. Other

7. Brief description

Like Adult Health Risk Appraisal (HRA), Teen HRA provides an individual with information about health and safety risks that are particular to the person's age, race, and sex. It provides an individualized assessment of risk based on average mortality (and morbidity) data, relative risk data from epidemiological studies, and questionnaire data relating the individual's lifestyle. A computer printout is provided to the individual along with an interpretation of the results. Opportunities for participation in risk reduction programs are also arranged at the time that the interpretations take place.

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Agency Division of Immunization, Center for Prevention Services, Centers for Disease Control

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The Division of Immunization, Center for Prevention Services, has as its mission the prevention and control of the vaccine-preventable diseases of measles, polio, mumps, rubella, diphtheria, tetanus and pertussis. This is accomplished through two primary channels:

1. Coordination of grant awards to State and local health departments for immunization activities, and

2. advice and consultation with groups and individuals involved with childhood immunization programs, primarily at the national level.

Grant awards to health departments are made on an annual basis and are administered as individual project areas coordinated by federal public health advisors. Each advisor responds to a State project director, the appropriate Regional Office, and the CDC in the course of his or her program. Public health advisors work closely with schools and with State education officials to identify and immunize the unprotected child.

CDC has identified nine major ways in which educational leaders, working in concert with public health officials, are helping to assure the success of the Immunization goals, both immediate and long-range:

1. Raising awareness of the problem among members of the educational community, parents and the general public.

2. Enforcing laws or regulations requiring children of any age to be immunized before entry to school; strengthening legislation where necessary.

3. Establishing and maintaining an effective school health record system.

4. Checking records and referring children who are inadequately immunized for appropriate followup.

5. Providing for immunization services to be administered at the school, where considered necessary as part of the community effort.

6. Encouraging parents of preschool-age children to have them immunized by the family health-care provider.

7. Reporting children who become ill with a communicable disease through the established procedures.

8. Strengthening school health programs to motivate individuals and families to practice sound disease-prevention measures in the future.

9. Supporting and assisting in the development of a comprehensive school health education program. The curriculum design should include education regarding specific procedures for disease prevention such as immunization, and provide the scientific knowledge and motivation to promote individual responsibility for personal, family and community health.

The most recent collection of State survey data indicates that national immunization levels for school enterers (K-1) are 97% for measles and rubella, 96% for polio and DTP, and 95% for mumps. Levels for older students are generally lower, but usually average over 90%.

Educators are naturally most concerned about the schoolage children who fall under their care. However, current medical practice recommends that children be vaccinated early in life. The polio and DPT (combined diphtheria, pertussis and tetanus) vaccines series are ideally started at eight weeks of age. The measles, rubella and mumps combination shot is usually administered at about 15 months.

Every year, over 3 million susceptible infants are born in the United States. Random surveys of day-care centers and surveys of 2-year-olds identified from birth information demonstrate that, in too many cases, parents wait until they are mandated by school law to protect their children.

This problem of incompletely immunized children still exists not only in areas where information is unavailable or poorly delivered due to problems of language, poverty or geography, but in suburban and affluent communities as well. All sectors of our society need constant attention to maintain acceptable rates of immunization. It is a goal which can only be met through cooperative efforts of both health and education officials.

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Agency Health Education Division, Center for Health Promotion and Education, Centers for Disease Control

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

1. Identifies for national consideration, problems and opportunities, proposes goals and objectives, and recommends priorities which will increase the capacity of the Federal and State Governments, CDC constituants and Private Sector organizations to carry out appropriate school health program activities.

2. Serves as a primary Federal source of technical assistance for School Health program problem identification, planning, development, dissemination of information, and evaluation.

3. Initiates and supports activities which are designed to complement the development and dissemination of comprehensive school health education resources.

4. In collaboration with other appropriate agencies, initiates and supports the development of efficient school health education information and exchange systems at the National, State and local level.

5. Identifies gaps in the delivery of health education/promotion within community settings and initiates activities to fill those gaps.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 24, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Health Education

2. Project/Activity Title State and Local Health Education Risk Reduction Programs

3. Contact for further information:

Name John M. Korn

Title Sr. Public Health Advisor

Street 1600 Clifton Road, Building 3, Room 108

City Atlanta State Georgia Zip Code 30333

Telephone (404) 329 3452

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
X c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
X d. Other Health Education Risk Reduction Program
(describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
X c. College Students
X d. Faculty and staff
___ e. Environmental
X f. General Public
X g. Parents
___ h. Other ________ (describe)

7. Brief description

The Health Education-Risk Reduction Grant Program was founded in 1979. This program established for the first time a network of Federal, State, and local official health agencies working together to reduce the risks of premature death and disability from chronic diseases or health conditions affected by smoking, alcohol use, hypertension, obesity, lack of exercise, stress and accidents. All State Health Departments, Washington, D.C., Guam, Puerto Rico and the U.S. Virgin Islands, were awarded funds.

These State or Territorial level projects were capacity-building grants to establish a focus within the geographic areas to (1) update and maintain and inventory resource of existing health education-risk reduction programs and services, (2) establish and foster working relationships among agencies, (3) determine risk factor prevalency data, (4) survey and establish systems for acquiring chronic disease morbitity and mortality data, and (5) assist communities in achieving an organized approach to risk reduction.

As part of these State and Territorial programs, approximately 165 local intervention projects were funded. One hundred and thirty were funded as adolescent smoking and alcohol intervention projects; many of these projects are being continued and are now addressing other risk factors.

In 1981, the Health Education Risk Reduction Grant Program was moved into the Preventive Health and Health Services Block Grant. One of the major missions of the Division of Health is to Provide technical assistance and consultation to States on health education-risk reduction matters.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Centers for Disease Control, Center for Health Promotion and Education

2. Project/Activity Title Collection of Literature and Program Information in Health Education

3. Contact for further information:

Name Priscilla B. Holman

Title Technical Information Officer

Street 1600 Clifton Road, N.E.

City Atlanta State Georgia Zip Code 30333

Telephone (404) 329-3235; FTS 236-3235

4. Category

x a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
___ d. Coordination

5. Anticipated years of operation

x a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

___ a. Primary Grade Students
___ b. Secondary Students
x c. College Students
x d. Faculty and Staff
___ e. Environmental
___ f. General Public
___ g. Parents
x h. Other Health Education Providers (describe)

7. Brief description

Since 1979, the Center for Health Promotion and Education has supported a project to provide current literature and program description information to health education providers by developing a bibliographic data base containing information that may be applied in various health education settings.

In the area of school health education, emphasis has been towards the collection and dissemination of (1) curriculum-type programs and approaches in such areas as disease prevention, health risk reduction, family life education, nutrition, and smoking; (2) school health education research and evaluation of methodology and knowlege, attitude, and behavior changes; (3) professional training programs in school health education; and (4) school health education programs as they relate to school services and programs such as school health education and nutrition programs through the school cafeteria.

During the past three years, this information has been disseminated through a monthly abstracting and indexing publication entitled "Current Awareness in Health Education" (CAHE) and a number of special bibliographies generated from CAHE. Among these special bibliographies are several in the area of school health education. "Current Awareness in School Health Education 1981" and "Current Awareness in School Health Education 1982" represent spinoffs of the school health education chapters from "Current Awareness in Health Education." "Health Promotion for Adolescents" includes literature and program information dealing with all aspects of health promotion and education for adolescents regardless of setting.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Immunization, Center for Prevention Services,
   Centers for Disease Control
2. Project/Activity Title Immunization and other disease prevention programs

3. Contact for further information:

   Name ________________

   Title ________________

   Street ________________

   City ________ State ________ Zip Code ________

   Telephone (____) ________

4. Category

   x a. Health Education (information, curriculum, etc.)
   x b. Health Services (Immunizations, Screenings, etc.)
   ___ c. Health School Environment (asbestos abatement, safe environment, etc.)
   x d. Coordination

5. Anticipated years of operation

   x a. Ongoing
   ___ b. FY 1983
   ___ c. FY 1984
   ___ d. Other ________________
   (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
x c. College Students
x d. Faculty and Staff
___ e. Environmental
x f. General Public
x g. Parents
___ h. Other

7. Brief description

There are seven points which CDC, through the grant fund mechanism, promotes as components of an effective school-based disease prevention program in every State:

a. A school attendance immunization law which applies to students from kindergarten or nursery school through graduation from colleges or universities. This law should require protection against all seven vaccine-preventable diseases: measles, mumps, rubella, polio, diphtheria, tetanus and pertussis. The law should also contain a provision for excluding from school those students who cannot provide proper documentation of protection against these diseases.

b. A permanent, standardized medically-verified immunization record on each child enrolled in the school, including the minimum information of day-month-year on which each dose of vaccine was received and/or documentation of exemption.

c. Periodic validation by local school or health department officials of the accuracy of these immunization records. An annual ten percent sample survey of all schools is needed to verify that transfers and new enterers are adequately immunized.

d. Immediate reporting to the health department by school personnel of any illness, particularly with rash suspected of being a vaccine-preventable disease.

e. Participation by school officials and employees in the outbreak control activities undertaken by health departments during epidemics, such as exclusion of students, school-based mass immunization clinics and public awareness programs.

f. Continuing efforts by school personnel to impress upon parents and guardians the importance of full immunization for each child at the appropriate age.

g. Emphasis on immunization in school health education curriculum as part of a program to maintain "wellness" for each student.

Additionally, the Division of Immunization at CDC works with national educational organizations, such as the national PTA, the American School Health Association, the American College Health Association, and various teachers' unions to promote awareness among their members of the need for immunization for students of all ages.

Food and Drug Administration

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by March 8, 1983.

Agency Food and Drug Administration

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The Food and Drug Administration's prime responsibility is to protect the public health in particular product areas specified by the Congress. These are foods (except red meat and poultry), drugs and biologics, medical devices, cosmetics and products that emit radiation. A concomitant responsibility is to promote the public health. To this end, the Agency participates in numerous programs/interactions with its various constituencies: consumer, academia, and health professional. One of the structured ongoing programmatic activities is to conduct consumer education programs. These are implemented by a network of Consumer Affairs Officers located in FDA offices across the country and in Puerto Rico. Students are identified as one of the target audiences in many of these education programs.

The Agency has no legal mandate to reach any particular population.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Food and Drug Administration

2. Project/Activity Title Consumer Education Programs in various Product Areas.

3. Contact for further information:

Name Ms. E. Hope Frank (HFO-22)
Title Consumer Affairs Analyst
Street 5600 Fishers Lane
City Rockville State MD Zip Code 20857
Telephone (301) 443-4166

4. Category

X a. Health Education (Information, Curriculum etc.)
b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
d. Coordination

5. Anticipated years of operation

X a. Ongoing
b. FY 1983
c. FY 1984
d. Other (describe)

6. Target Group

____ a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
__X__ d. Faculty and staff (teachers)
____ e. Environmental
__X__ f. General Public
____ g. Parents
____ h. Other some student organizations (describe)

7. Brief description

1) Health related topics included in current FY'83 Consumer Education Programs are: *

Food Safety and Quality
(Dietary Sodium, Infant Formula, Food Additives, Nutrition Labeling, Chemical Contaminants)

Drug Safety and Quality
(Adverse Reactions, Patient Education and Safe Use of Drugs, Misuse of Legitimate Drugs, Role and Use of Vaccines)

Radiological Health: Product Applications
(Microwave Ovens, Mercury Vapor and Metal Halide Lamps, Lasers, Sunlamps and Tanning Huts)

Radiological Health: Medical Applications
(Risk/Benefit Concept, Avoidance of Unnecessary Exposure, X-rays and Pregnancy, Patient/Consumer Education)

Quackery
(Agency responsibilities/limitations,
- supplements, diets, nutrition
- misrepresented drugs
- deceptive/harmful devices

Guidance to consumers, Registering Complaints)

* Other topics (not directed toward students) are included in additional educational programs.

2) Special Projects

A special educational program on Toxic Shock Syndrome (TSS) is being piloted this school year in three area school jurisdictions. Teen-age girls are the target group.

Health Resources and Services Administration

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by March 8, 1983.

Agency Health Resources and Services Administration (HRSA)

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The basic mission of the Health Resources and Services Administration is to provide leadership and direction to programs and activities designed to improve health services for all people in the United States and to develop health care and maintenance systems which are responsive to the needs of individuals and families in all levels of society. In support of this basic mission the following activities are major areas of concentration:

- Provide leadership and support efforts designed to integrate health services delivery programs with public and private health financing programs, including the health maintenance organizations.
- Administer health service block grants, categorical grants and formula grant-supported programs.
- Provide or arrange for personal health services to designated beneficiaries.
- Administer programs to improve the utilization of health resources, with a particular focus on the capital area.
- Provide leadership to improve the education, training, distribution, supply, use and quality of the Nation's health personnel.
- Provide advice and support to the Assistant Secretary for Health in the formulation of health policies.

The Agency implements School Health Promotion efforts through programs and services administered by the Agency's various program components, principally the Bureau of Health Care Delivery and Assistance; the Bureau of Health Professions; and the Indian Health Service. Mission statements for these components, including those relating especially to promoting health for the school-age population are as follows:

Office of Disease Prevention
and Health Promotion
The Reporters Building
300 7th Street, S.W., Room 613
Washington, D.C. 20201
(202) 472-5308

A. Bureau of Health Care Delivery and Assistance

- Assists States through program and clinical efforts to provide health care to underserved populations through the Primary Health Care Block Grant and through the Maternal and Child Health Services Block Grant;

- Provides through project grants to State, local, voluntary, public and private entities, funds to help them meet the health needs of special populations such as migrants and victims of black lung disease;

- Provides leadership and direction for the Bureau of Prisons Medical Program, the National Hansen's Disease Program, the Federal Employees Occupational Health Program, CHAMPUS Program and the Cuban and Haitian Refugee Program;

- Administers a comprehensive health program for designated PHS beneficiaries including active duty members of the Coast Guard, PHS, and the National Oceanic and Atmospheric Administration;

- Administers the National Health Service Corps program which assures accessibility of health care in underserved areas.

1. Division of Primary Care Services

Community Health Centers are encouraged to form working relationships with other resources in the community, including schools, to address the unmet health and health-related needs of the population in their service area. These cooperative efforts in the form of service and organizational linkage lead to the formation of a "system" or network of community resources.

The Urgent Supplemental Appropriation for FY 1982 designated $10 million for health promotion/disease prevention activities in community health centers. This funding is being used primarily for community activities related to twelve health areas, i.e., smoking, alcohol abuse, drug abuse, nutrition, weight control and exercise, dental health, accident prevention, diabetes control, hypertension, maternal health, child health, family health and the health of disabled persons. These activities are being planned and carried out in conjunction with organizations such as medical societies, local government agencies, PTA's, schools, voluntary health, civic and religious organizations. Examples of school health activities include "health awareness days", presenting programs to students, training teachers, and recruiting local dentists to deliver educational sessions on dental health.

This program is continuing with another $10 million earmarked for HPDP awards in FY 1983.

The Migrant Health legislation (PHS Act, Title III, Sec 329) supports public or nonprofit private entities providing health services to migratory and seasonal agricultural workers and members of their families. Although no direct support is provided to school facilities, the migrant health clinics provide health education, promotion, prevention, and other health services such as physical exams, screenings, immunizations through cooperative agreements with school systems.

2. Division of Maternal and Child Health (DMCH)

The Maternal and Child Health Services Block Grant authorized by the 1981 amendments to Title V of the Social Security Act (Tab A), provides funds to State Title V Agencies (Tab B), which allows each State to develop its own program for improving the health of all children and youth under age 21 and women of childbearing age. Funds are also provided for discretionary grants for carrying out special projects of regional and national significance i.e., (1) training and research related to health of mothers and children, (2) genetic disease testing, counseling and information development, and (3) comprehensive hemophilia diagnostic centers. A dynamic relationship exists between the discretionary grant program and the State service programs which allows development of new knowledge and approaches to changing trends, needs and issued in maternal and child health to be translated into improved health care delivery.

The State Title V Agencies work towards the development of a systematic, comprehensive and coordinated approach to health care for the school-age population. These Agencies have a major responsibility for the health of school-age children through their authority and role in the State for planning, promoting, developing and coordinating health services for all mothers and children in the State. Some basic functions related to the health of school-age children are common across most States. The following are examples of these functions.

- Collection, recording and analysis of demographic, socioeconomic, health services and resources data; health status information; interpretation of health needs and problems for the purpose of planning and evaluating programs for the school-age population.

- Assuring quality health assessments and services for school-age children through establishing and applying professional standards, criteria, policies and procedures,

- Providing administrative and clinical consultation and technical assistance for providers of health services for school-age children,

- Administration and management of school health services in selected States,

- Coordination of health services to assure access to care, avoid duplication and make maximum use of resources through strategies such as referral mechanisms and interagency collaborative efforts, and

- Providing direct services

Variations in approaches exist among States because of differences in their geopolitical jurisdictions, organizational structures, legislative authority, availability of resources and other factor. The State Title V Agency's role in coordination is underscored by the recognition that the health of school-age children is a shared responsibility involving children, parents, families and a network of health care providers in both the private and public sector, as well as other individuals, agencies, and organizations.

B. Bureau of Health Professions

- Assess the Nation's health personnel supply and requirements and forecasts supply and requirements for future time periods under a variety of health resources utilization strategies;

- Collects and analyzes data and disseminates information on the characteristics and capacities of the Nation's health personnel production systems;

- Develops, tests and demonstrates new and improved approaches to the development and utilization of health personnel within various patterns of health care delivery and financing systems;

- Provides financial support to institutions and individuals for health professions education programs;

- Administers Federal programs for targeted health personnel development and utilization;

- Provides leadership for assuring equity in access to health services and health careers for the disadvantaged;

- Serves as a focus for technical assistance activities in the international aspects of health personnel development, including the conduct of special international projects relevant to domestic health personnel problems.

1. Division of Nursing:

Nurse Research Grants Program provides grants to any corporation, public or private institution or agency, or other legal entity, to support basic and clinical research related to the care process, to enlarge institutional nursing research capabilities; to foster scientific communication; and to address significant questions in nursing education, manpower, and administration.

The Nurse Practitioner Program provides grants and contracts to schools of nursing medicine, and public health, as well as other public or nonprofit private entities to plan, develop, and operate or expand or maintain existing programs for the training of nurse practitioner.

2. Division of Medicine:

The Area Health Education Centers Program (AHEC) through cooperative agreements awarded to medical schools and osteopathic schools, provides funding for regionalized interventions to address the primary care health professions maldistribution problem. Through a partnership with a community entity (i.e., an area health education center), the health science school provides training for potential health professions candidates in remote and underserved areas.

Although the AHEC Program is basically a health professions development program, the linkage with the community has resulted in an expressed desire for initiatives which relate to school health. It is for this reason that almost all our currently funded projects allocate some funds to school health activities. (See item 7)

Currently, we have projects in Ohio, California, Massachusetts, Eastern Virginia, Maryland, Pittsburgh, New Jersey, South Dakota and Colorado. We have one urban project in Connecticut.

Every AHEC project developed in conjunction with a school has had the endorsement of its administration, its faculty and its parent's groups. All activities under the "school health" rubric is supervised by the appropriate school.

C. Indian Health Service (IHS)

- Assists Indian tribes in developing their capacity to man and manage their health programs through activities including health and management training, technical-assistance and human resource development;
- Facilitates and assists Indian tribes in coordinating health planning, in obtaining and utilizing health resources available through Federal, State and local programs, in operation of comprehensive health programs, and in health program evaluation;
- Provides comprehensive health care services, including hospital and ambulatory medical care, preventive and rehabilitative services, and development of community sanitation facilities;
- Serves as the principal Federal advocate for Indians in the health field to assure comprehensive health services for American Indians and Alaska Natives.

The IHS, in cooperation with local school administrators, assists in the provision of a comprehensive school health program. The objectives of this program are:

1. To make available to each American Indian and Alaska Native student a school health program that is integrated with his/her entire educational experience.
2. To provide a school health program that will help all students reach their full educational potential.
3. To encourage that each school health program be developed and implemented according to IHS policies and standards.

Each school health program should address the following areas:

School Health Services
School Health Education
Healthful School Environment

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Reference: (Tab C)

IHS Manual Part 3, Professional Services
Chapter 13, Maternal and Child Health
Section 7, School Health

The mission of the Nutrition and Dietetics Branch, IHS in School Health Promotion is to provide nutrition education, consultation, in-service training to faculty and staff and technical assistance in order to improve the overall health status of Indian school children.

The mission of the IHS Dental Program is to protect and promote oral health and prevent oral disease among all Federally recognized American Indian and Alaska Natives. In pursuant of this mission the Dental Program promotes access to oral health services for all eligible people including school children, provides professional services in accordance with appropriate quality standards and public health priorities and encourages high quality understanding, capability and action in oral health promotion and disease prevention by individuals, communities, support organizations and staff.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 4, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Maternal and Child Health, BHCDA, HRSA

2. Project/Activity Title Health Promotion and Disease Prevention Projects

3. Contact for further information:

Name Vince L. Hutchins, M.D.

Title Director, Division of Maternal and Child Health, BHCDA, HRSA

Street Parklawn Building, Room 6-05
5600 Fishers Lane

City Rockville, State Maryland Zip Code 20857

Telephone (301) 443-2170

4. Category

- X a. Health Education (Information, Curriculum etc.)
- x b. Health Services (Immunizations, Screenings etc.)
- ___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- X d. Coordination

5. Anticipated years of operation

- X a. Ongoing
- ___ b. FY 1983
- ___ c. FY 1984
- ___ d. Other ________ (describe)

. Target Group

X a. Primary Grade Students
X b. Secondary Students
___ c. College Students
___ d. Faculty and staff
___ e. Environment
___ f. General public
X g. Parents
___ h. Other ______
(Describe)

7. Brief description

Three special studies will address the current priority of health promotion and disease prevention. The three projects will provide information on effective methods and approaches to health promotion/disease prevention, with emphasis on reaching "hard-to-reash" populations; will document successful methods for mobilizing community agencies, groups, and individuals to work toward a common prevention goal; and will demonstrate practical and effective ways to institutionalize the project experience in the State MCH Services Block Grant program.

(1) The Connecticut project is directed to the prevention of perinatal and child health problems in low-income, Hispanic women and children. The services of licensed health practitioners and bilingual, bicultural comadronas will be combined to provide a support network on information about pregnancy, childbirth, and child care.

(2) The Michigan project focuses on helping children in fourth, fifth and sixth grades develop personal attitudes and behaviors that have a positive impact on health. Music will be used as a medium to enhance the acquisition and practice of health decisionmaking.

(3) The New York project will focus on 30,000 children in selected grade schools and junior high schools in poor, inner-city, high risk areas and is designed to increase children's understanding of problems related to alcohol and drug abuse, violence, and early pregnancy and to increase their self-awareness, self-esteem, amd self-control inorder to decrease such problems.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Maternal and Child Health, BHCDA, HRSA

2. Project/Activity Title Interdisciplinary Adolescent Health Training Projects

3. Contact for further information:

Name Vince L. Hutchins, M.D.

Title Director, Division of Maternal and Child Health, BHCDA, HRSA

Street Parklawn Building, Room 6-05
5600 Fishers Lane

City Rockville State Md. Zip Code 20857

Telephone (301) 443-2170

4. Category

- a. Health Education (Information, Curriculum etc.)
- X b. Health Services (Immunizations, Screenings etc.)
- c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- d. Coordination

5. Anticipated years of operation

- X a. Ongoing
- b. FY 1983
- c. FY 1984
- d. Other (describe)

Adolescent Health Training
Project Directors

Adolescent Health Training
William A. Daniel, Jr., M.D.
Professor, Director of Adolescent Medicine
University of Alabama
University Station
Birmingham, Alabama 35294

Interdisciplinary Adolescent Health Training
Charles E. Irwin, Jr., M.D.
Director, Adolescent Health Program
Department of Pediatrics
School of Medicine
University of California
San Francisco, California 94143

Graduate Education in Adolescent Medicine
Felix P. Heald, M.D.
Head, Division of Adolescent Medicine
University of Maryland Hospital
22 South Green Street
Baltimore, Maryland 21201

Adolescent Health Training Program
Robert W. Blum, M.D.
Assistant Professor
Departments of Maternal and Child
  Health and Pediatrics
University of Minnesota
Box 721 Mayo Memorial
Minneapolis, Minnesota 55455

Multidisciplinary Training in Adolescent Health
Joseph L. Rauh, M.D.
Director, Division of Adolescent Medicine
Children's Hospital Medical Center
Pavilion Building
Elland & Bethesda Avenues
Cincinnati, Ohio 45229

Adolescent Health Training
Robert W. Deisher, M.D.
Director, Division of Adolescent Medicine
Adolescent Program
CDMRC (WJ-10)
University of Washington
Seattle, Washington 98195

6. Target Group

_____ a. Primary Grade Students
_____ b. Secondary Students
_____ c. College Students
_____ d. Faculty and staff
_____ e. Environmental
_____ f. General Public
_____ g. Parents
__x__ h. Other Health professions
(describe)

7. Brief description

The Interdisciplinary Adolescent Health Training projects provide specialized graduate level training for individuals who will assume leadership positions in adolescent health care in the public and academic sectors; assist current adolescent health care providers through continuing education and consultation; and, through research expands the knowledge base upon which health services to youth are provided. Trainees in these programs are provided opportunities to synthsize the knowledge base, skills and methods of adolescent health care into an integrated approach to working with youth of diverse backgrounds in illness and health.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 3, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Maternal and Child Health, BHCDA, HRSA

2. Project/Activity Title Longitudinal Studies of At-Risk Adolescents and Families

3. Contact for further information:

Name Vince L. Hutchins, M.D.

Title Director, Division of Maternal and Child Health, BHCDA, HRSA

Street Parklawn Building, Room 6-05
5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-2170

4. Category Reaearch

- ____ a. Health Education (Information, Curriculum etc.)
- ____ b. Health Services (Immunizations, Screenings etc.)
- ____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- ____ d. Coordination

5. Anticipated years of operation

- ✓ a. Ongoing
- ____ b. FY 1983
- ____ c. FY 1984
- ____ d. Other ____________ (describe)

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6. Target Group

_____a. Primary Grade Students
__x__b. Secondary Students
_____c. College Students
_____d. Faculty and staff

_____e. [illegible]
_____f. General Public
_____g. Parents
_____h. Other ________
(Specify)

7. Brief description

This study is to complete an ongoing large longitudinal investigation of two groups of adolescent patients (diabetic and psychiatric) together with a matched healthy control group. The problem being investigated concerns the impact of an adolescent's chronic illness upon his or her psychosocial development and personality. In addition, the investigation looks at linkages between the family context and the adolescent developmental trajectories. With respect to the family, there are two major questions: (1) What are the influences of the child's adaptation (ego development, ego processes, coping)?

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Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 4, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Maternal and Child Health, BHCDA, HRSA

2. Project/Activity Title A Model of Adolescent Perinatal Risk Behavior

3. Contact for further information:

Name Vince L. Hutchins, M.D.

Title Director, Division of Maternal and Child Health, BHCDA, HRSA

Street Parklawn Building, Room 6-05
5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-2170

4. Category Research

_____ a. Health Education (Information, Curriculum etc.)
_____ b. Health Services (Immunizations, Screenings etc.)
_____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
_____ d. Coordination

5. Anticipated years of operation

__✓__ a. Ongoing
_____ b. FY 1983
_____ c. FY 1984
_____ d. Other ________________
(describe)

6. Target Group

_____ a. Primary Grade Students
__x__ b. Secondary Students
_____ c. College Students
_____ d. Faculty and staff

_____ e. Environment
_____ f. General Public
_____ g. Parents
_____ h. Other
(Specify)

7. Brief description

This study proposes the development and validation of a model of factors related to and including adolescent health behavior during pregnancy. Specific aims are to provide a detailed description of the "career" of adolescent pregnancy as it pertains to health outcomes, and to generate cconstructs and hypotheses which will direct the future development and implementation of a perinatal risk reduction campaign for adolescents. Utilization of a social learning perspective directs particular attention to environmental variables which condition individual health behavior.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Maternal and Child Health, BHCDA, HRSA

2. Project/Activity Title Proposal to Screen Third Grade Children for Seizures

3. Contact for further information:

Name Vince L. Hutchins, M.D.

Title Director, Division of Maternal and Child Health, BHCDA, HRSA

Street Parklawn Building, Room 6-05 ~~5600 Fishers Lane~~

City Rockville, State Maryland Zip Code 20857

Telephone (301) 443-2170

4. Category

Research

- ☐ a. Health Education (Information, Curriculum etc.)
- ☐ b. Health Services (Immunizations, Screenings etc.)
- ☐ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- ☐ d. Coordination

5. Anticipated years of operation

- ☑ a. Ongoing
- ☐ b. FY 1983
- ☐ c. FY 1984
- ☐ d. Other ________ (describe)

6. Target Group

_X_ a. Primary Grade Students
___ b. Secondary Students
___ c. College Students
___ d. Faculty and staff
___ e. Environmental
___ f. General Public
___ g. Parents
___ h. Other ________
(describe

7. Brief description

This study seeks to determine the prevalence of epilepsy in a selected population, all third grade students in Albemarle County, Virginia, as well as all 8 year old students in special classes.

The screening will be done by means of a questionnaire consisting of 31 questions. It is designed to elicit overt and subtle symptoms of the seizure state or history of medical investigation or treatment for seizures. Letters and home visits by staff will be used to achieve maximum participation.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Maternal and Child Health, BHCDA, HRSA

2. Project/Activity Title Genetic Diseases Program
Genetic Education Curriculum Package

3. Contact for further information:

Name Vince L. Hutchins, M.D.

Title Director, Division of Maternal and Child Health, BHCDA, HRSA

Street Parklawn Building, Room 6-05
5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-2170

4. Category

- x a. Health Education (Information, Curriculum etc.)
- ____ b. Health Services (Immunizations, Screenings etc.)
- ____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- ____ d. Coordination

5. Anticipated years of operation

- ____ a. Ongoing
- ____ b. FY 1983
- ____ c. FY 1984
- x d. Other Completed 1982 (describe)

6. Target Group

_____ a. Primary Grade Students
__X__ b. Secondary Students
_____ c. College Students
__X__ d. Faculty and staff

_____ e. Environmental
_____ f. General Public
_____ g. Parents
_____ h. Other ________
(describe)

7. Brief description

The primary goal of the Genetic Diseases Program is to deliver genetic diseases information, education, testing, and counseling services, and provide medical referral for all persons seeking information who are suspected of having or transmitting a genetic condition.

The education component of the genetic service projects and sickle cell clinic projects includes seminars for medical and health professionals, as well as presentations for lay audiences and groups at risk for genetic disorders. Health fairs, journals, television, radio and newspapers, are used to provide educational and informational materials on genetic diseases and services.

A genetic education curriculum package for junior high school students has been developed by the Biological Sciences Curriculum Study (BSCS) Denter for Education in Human and Medical Genetics in Boulder, Colorado.

The Curriculum, Genes and Surroundings, explores topics of human variability, continuity, development, and adaptation in a con text appropriate to the cognitive development and social maturity of students grades 6-9. The curriculum has been pilot tested and will be used now for inservice teacher training.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Maternal and Child Health, BHCDA, HRSA

2. Project/Activity Title Accident Prevention Projects

3. Contact for further information:

   Name Vince L. Hutchins, M.D.

   Title Director, Division of Maternal and Child Health, BHCDA, HRSA

   Parklawn Building, Room 6-05

   Street 5600 Fishers Lane

   City Rockville State Maryland Zip Code 20857

   Telephone (301) 443-2170

4. Category

   x a. Health Education (Information, Curriculum etc.)
   x b. Health Services (Immunizations, Screenings etc.)
   ___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
   x d. Coordination

5. Anticipated years of operation

   x a. Ongoing
   ___ b. FY 1983
   ___ c. FY 1984
   ___ d. Other ______ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
c. College Students
d. Faculty and staff

e. Environment [illegible]
f. General [illegible]
x g. Parents
x h. Other Health providers

7. Brief description

Because accidents and injuries are a major cause of mortality and morbidity for children, this effort was initiated to focus on accident prevention, injury control and improvement of diagnostic and treatment services. State Title V agencies in California, Massachusetts and Virginia received funds to design, develop, implement and evaluate projects which would decrease preventable mortality and morbidity resulting from accidents/injuries in children.

The project grantees have focused their efforts on the major causes of non-vehicular accidents in childhood. For example, they are particularly concerned about accidents resulting from poisonings; burns; use of skateboards or bicycles; and drownings. They have worked diligently to coordinate and involve the regional Emergency Medical Services, Poison Control Centers, professional organizations, health care providers, voluntary agencies and others who can contribute to the effort

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Bureau of Health Care Delivery and Assistance
Division of Primary Care, Office of Migrant Health

2. Project/Activity Title Migrant Health Program

3. Contact for further information:

Name Dr. Michael E. Samuels

Title Director

Street 5600 Fishers Lane, Room 7A55

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1153

4. Category

x a. Health Education (information, curriculum, etc.)
x b. Health Services (immunizations, screenings, etc.)
x c. Health School Environment (asbestos abatement, safe environment, etc.)*
____ d. Coordination

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

____ a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
____ d. Faculty and Staff
____ e. Environmental
____ f. General Public
____ g. Parents
x h. Other migrant and seasonal agricultural workers and their families (describe)

*Health education activities on accident prevention and environmental conditions.

#7 - Description

The purpose of the Migrant Health Program is to support through grants the planning, development, and delivery of high quality health care services in rural areas for migrant and seasonal farmworkers and their families. A comprehensive range of health services is provided to include:

A. Primary Health Services:

1. Services of physicians and, where feasible, services of of physicians' assistants and nurse clinicians;
2. Diagnostic laboratory and radiologic services;
3. Preventive health services (including children's eye and ear examinations to determine the need for vision and hearing correction, perinatal services, well child services, and family planning services);
4. Emergency medical services;
5. Transportation services as required for adequate patient care;
6. Preventive dental services; and
7. Pharmaceutical services.

B. Supplemental health services as may be appropriate which may include:

1. Hospital services;
2. Home health services;
3. Extended care facilities;
4. Rehabilitative services (including physical theraphy) and long-term physical medicine;
5. Mental health services;
6. Dental services;
7. Vision services;
8. Allied health services;
9. Therapeutic radiologic services;
10. Public health services (including, for the social and other nonmedical needs which affect health status, counseling, referral for assistance, and follow-up services);
11. Ambulatory surgical services; and
12. Health Education services (including nutrition education).

C. Referral to providers of supplemental health services and payment, as appropriate and feasible, for their provision of such services;

D. Environmental health services, including the detection and alleviation of unhealthful conditions associated with water supply, sewage treatment, solid waste disposal, rodent and parasitic infestation, field sanitation, housing and other environmental factors related to health;

E. As may be appropriate, infections and parasitic disease screening and control;

F. As may be appropriate, accident prevention programs, including prevention of excessive pesticide exposure, and

G. Information on the availability and proper use of health services.

Most clinics have established arrangements with area schools for their clinical staff to provide referrals, promotion and screening activities on school site. These arrangements range from formal contractual agreements to informal agreements.

In addition, the Migrant Head Start Program and Migrant Health Program are exploring the feasibility of an inter-agency agreement to coordinate policies at the national and local levels and to work with the State Maternal and Child Health agency which has the responsibility for assuring availability, accessibility and quality of child health care in the State. The goal is to achieve better interprogram communication, coordinated planning for the provision of health services to Migrant Head Start children at a below cost negotiated rate, to provide screenings and physicals by the local Migrant Health Center. Migrant Head Start will fund the screenings and physicals and assist the Migrant Health Program in seeking alternate sources of funding; assume responsibility for preparing and transporting children and parents for screening and physicals; assist in supervising children during the clinic visits, and in helping the clinic staff keep its parents informed about their child's health.

In 1979, an interagency agreement was established between the Migrant Education Program and the Migrant Health Program to coordinate their policies and procedures to assure the more effective and efficient extension of health care to eligible migrant children enrolled in the Migrant Education Program. Use of the Migrant Student Record Transfer System was emphasized. This interagency agreement is in the process of being renewed.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Primary Care Services, BHCDA, HRSA

2. Project/Activity Title Health Promotion/Disease Prevention

3. Contact for further information:

Name Elsie Sullivan

Title Public Health Analyst, Division of Primary Care Services

Street 5600 Fishers Lane, Room 7A-55

City Rockville State Md. Zip Code 20857

Telephone (301) 443-2220

4. Category

x a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
x d. Coordination

5. Anticipated years of operation

x a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HRSA, BHPr, Division of Nursing, Nurse Practitioner Program

2. Project/Activity Title School Nurse Practitioner Program

3. Contact for further information:

Name Mrs. Judy Igoe

Title Assistant Professor

University of Colorado School of Nursing

Street 4200 East 9th Avenue

City Denver State Colorado Zip Code 80262

Telephone (303) 394-7435

4. Category

x a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
___ d. Coordination

5. Anticipated years of operation

x a. Ongoing
x b. FY 1983
x c. FY 1984
___ d. Other funded since 1976 (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
___ c. College Students
___ d. Faculty and Staff
___ e. Environmental
___ f. General Public
___ g. Parents
___ h. Other

7. Brief description

- The University of Colorado Medical Center has developed a 16-month innovative School Nurse Practitioner Program for nurses interested in the delivery of primary health care to school age children and adolescents.

- The program is tailored to needs of the school nurse with three months of home study required prior to entering the program, followed by two full-time summer sessions held at the University which are organized around the clinical experience scheduled during the academic year at the school nurse's work setting.

- The program has developed and utilizes health education booklets to increase the school-age child's awareness of his/her health. The booklets which have been published are age specific and geared to the child's developmental level. The goal of these booklets is to develop participatory consumers of health care.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HRSA, BHPr, DN

2. Project/Activity Title Research Grant: Effect of School Nursing on Dental Referral Outcome

3. Contact for further information:

Name Dorothy Oda

Title Principal Investigator

School of Nursing, University of Colorado

Street 3rd Avenue and Parnassus

City San Francisco State California Zip Code 94143

Telephone (____) ____________

4. Category

- ____ a. Health Education (information, curriculum, etc.)
- x b. Health Services (immunizations, screenings, etc.)
- ____ c. Health School Environment (asbestos abatement, safe environment, etc.)
- ____ d. Coordination

5. Anticipated years of operation

- ____ a. Ongoing
- x b. FY 1983
- ____ c. FY 1984
- ____ d. Other ____________ (describe)

6. Target Group

- x a. Primary Grade Students
- ____ b. Secondary Students
- ____ c. College Students
- ____ d. Faculty and Staff
- ____ e. Environmental
- ____ f. General Public
- ____ g. Parents
- ____ h. Other

7. Brief description

A study to examine the effects of school nurse follow-up services after screening on the receipt of dental care in 5th and 6th grade students.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HRSA, BHPr, DN

2. Project/Activity Title Research Grant: Health Awareness Program Conducted by School Nurses

3. Contact for further information:

Name Dr. Shu-Pi Chen

Title Principal Investigator

College of Nursing, University of Illinois

Street 845 South Damen Avenue

City Chicago State Illinois Zip Code 60612

Telephone ( )

4. Category

a. Health Education (information, curriculum, etc.)
x b. Health Services (immunizations, screenings, etc.)
c. Health School Environment (asbestos abatement, safe environment, etc.)
d. Coordination

5. Anticipated years of operation

a. Ongoing
x b. FY 1983
x c. FY 1984
d. Other
(describe)

6. Target Group

a. Primary Grade Students
b. Secondary Students
c. College Students
x d. Faculty and Staff
e. Environmental
f. General Public
g. Parents
h. Other

7. Brief description

A study to determine the effects of a Health Awareness Program, provided by school nurses for school personnel, on case finding by school personnel.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HRSA, BHPr, DN

2. Project/Activity Title Research Grant: A Study of School Nurses' Use of Project Health P.A.C.T.

3. Contact for further information:

Name Dr. Laura D. Goodwin

Title School of Nursing

Street University of Colorado

City Denver State Colorado Zip Code 80262

Telephone (____) ______________

4. Category

- x a. Health Education (information, curriculum, etc.)
- ___ b. Health Services (immunizations, screenings, etc.)
- ___ c. Health School Environment (asbestos abatement, safe environment, etc.)
- ___ d. Coordination

5. Anticipated years of operation

- ___ a. Ongoing
- x b. FY 1983
- x c. FY 1984
- x d. Other 1985, 1986 (describe)

6. Target Group

- x a. Primary Grade Students
- ___ b. Secondary Students
- ___ c. College Students
- ___ d. Faculty and Staff
- ___ e. Environmental
- ___ f. General Public
- ___ g. Parents
- ___ h. Other

7. Brief description

A project to assess the effectiveness of an innovative approach to health education for school age children: Project Health P.A.C.T. The education program aims to prepare school-age youths to assume a more assertive role when seeking health services.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Health Resources and Services Administration, BHPr, DN

2. Project/Activity Title Area Health Education Centers (AHEC) (A Cooperative Agreement Mechanism for Funding Health Professions Education

3. Contact for further information:

Name Cherry Y. Tsutsumida

Title Chief, AHEC Branch, Division of Medicine, Bureau of Health Profession

Street Parklawn Building

City Rockville State Maryland Zip Code 20857

Telephone (301) 436-6650/443-6950 after April 15.

4. Category

[✓ a. Health Education (information, curriculum, etc.)]
b. Health Services (immunizations, screenings, etc.)
c. Health School Environment (asbestos abatement, safe environment, etc.)
[✓ d. Coordination]

5. Anticipated years of operation

[✓ a. Ongoing]
b. FY 1983
c. FY 1984
d. Other ______________ (describe)

6. Target Group

a. Primary Grade Students
[✓ b. Secondary Students]
[✓ c. College Students]
d. Faculty and Staff
e. Environmental
f. General Public
g. Parents
h. Other

7. Brief description

The Area Health Education Centers Program, through educational interventions, is charged with addressing the health professions mal-distribution problem. Although most of its efforts are directed toward remote site training of health professionals, the Program (through Cooperative Agreement awards to underserved target areas) impacts on school health in the following ways:

1. It provides clerkship rotations for medical students whereby supervised experience is given to potential primary care physicians to work with high school students on such issues as sex education, drug abuse, and adolescent health. Although the prime purpose of clerkship is to give potential physicians practice in working with teenagers in a classroom setting, health teachers have all stated that the response of the teenagers has made this worthy of an educators time.

2. It has provided the mechanism whereby EPSDT test for an urban ghetto is done through the school system and rembursed through Medicaid.

3. It has provided learning resource centers and career counseling for minority students interested in health careers. In some sites it has provided computer learning skills development since many minority students in urban areas have little exposure to computerized learning. In the presentation of career development activities, prevention and health promotion are genrally the substantive issues around which the curriculum is focused.

4. With the growth of the Adolescent Health Movement, the AHECS have served as facilitators to bring community resources together so that high school students could be more appropriately referred to psychological and physical health resources.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HRSA: Indian Health Service

2. Project/Activity Title Dental Program

3. Contact for further information:

Name Dr. Robert Collins

Title Assistant Chief, Dental Services Branch

Street 5600 Fishers Lane, Room 5A-12

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1106

4. Category

x a. Health Education (information, curriculum, etc.)
x b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
x d. Coordination

5. Anticipated years of operation

x a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

x a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
____ d. Faculty and Staff
____ e. Environmental
____ f. General Public
____ g. Parents
x h. Other Headstart (describe)

7. Brief description

The IHS Dental Program provides oral health education to Indian primary grade and Headstart children via a variety of mechanisms, including chairside education during clinical appointments, presentations by IHS dentists, auxiliaries or dental hygienists in the school and by training community health representatives and Head start program aides to reinforce the oral health message in the schools.

Dental health services now focus on the school child as a member of the family unit in order to reinforce the oral health at home as well as in school. Arrangement for delivery of dental services can be made for children whose families are unable to present themselves for care. Preventive services are now focused on the continued implementation of successful water fluoridation and occlusal sealant programs to reduce the need for treatment of dental caries, a disease that now afflicts over 90% of the shcool age population.

The Dental Program also maintains contact with primary school and local Head start officials in order to better coordinate and facilitate the receipt of oral health services. In non-fluoridated areas, fluoride mouthrinse program have been developed in cooperation with school officials for use in the classroom.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service (IHS)

2. Project/Activity Title Nursing

3. Contact for further information:

Name Phyllis L. Colhoff

Title Nurse Consultant/Recruiter

Street 5600 Fisher's Lane, Room 5A-09

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1840

4. Category

X a. Health Education (Information, Curriculum etc.)
x b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

x a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

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6. Target Group

X a. Primary Grade Students
X b. Secondary Students
X c. College Students
X d. Faculty and staff
___ e. Environmental
X f. General Public
X g. Parents
X h. Other Head start
(describe)

7. Brief description

The IHS nursing staff provides the following services for support of school health activities:

I. Screening:

A. Physical appraisals and examinations including screening of height/weight, vision, hearing and scoliosis.
B. Laboratory tests such as hematocrits and urinalysis.
C. Immunization status and providing needed immunizations and tuberculin tests.

II. Referrals:

A. Children with suspected difficulties would be sent to physicians, social service agencies, etc.
B. Referrals are also made to other Federal, State and County Agencies.

III. Health Education:

A. Formal or informal sessions are provided on such topics as:

Health promotion, growth and development, First-Aid including CPR, safety, nutrition, alcohol and substance abuse, prenatal care, child care etc.

IV. Coordination

A. Work with administrators to:

Develop procedures for care of emergencies.
Follow up and/or referral of students with psychosocial problems.

B. Work with county, State or other government agencies providing services to Indian students.

FORM 8

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service (IHS)

2. Project/Activity Title Injury Control

3. Contact for further information:

Name Gary Morigeau

Title Safety Manager

Street 5600 Fishers Lane, Room 6A-54

City Rockville State MD Zip Code 20857

Telephone (301) 443-1054

4. Category

☐ a. Health Education (Information, Curriculum etc.)
☐ b. Health Services (Immunizations, Screenings etc.)
☒ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
☐ d. Coordination

5. Anticipated years of operation

☒ a. Ongoing
☐ b. FY 1983
☐ c. FY 1984
☐ d. Other ____________
(describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
___ c. College Students
___ d. Faculty and staff
___ e. Environmental
X f. General Public
X g. Parents
___ h. Other ___________ (describe)

7. Brief description

The IHS Community Injury Control Program is designed to interface with all segments of an Indian Community which includes the school age population through injury control promotion and education. Examples of training activities are: bicycle safety, seat belt usage, fire safety, playground safety, safe firearms handling, home environment safety.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service

2. Project/Activity Title Health Curriculum Development

3. Contact for further information:

Name Marland Koomsa

Title Chief, Health Education Branch

Street 5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1870

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

✓ a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

__x__ a. Primary Grade Students
__x__ b. Secondary Students
_____ c. College Students
_____ d. Faculty and staff
_____ e. Environmental
_____ f. General Public
_____ g. Parents
_____ h. Other __________ (describe)

7. Brief description

The alcohol curriculum, "Here's Looking at You", has been implemented in the Lame Deer Elementary School (K-6) and at Labre High School, Ashland, Montana; Intermountain School (Brigham City, Utah); and Chemawa Indian School in Oregon. It should be noted that most of our efforts in health education are with Federal schools (BIA), tribally controlled schools and public schools that have a large Indian enrollment.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service

2. Project/Activity Title School Health Curriculum Project
Browning, Montana and Pine Ridge, South Dakota

3. Contact for further information:

Name Marland Koomsa

Title Chief, Health Education Branch

Street 5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1870

4. Category

x a. Health Education (information, curriculum, etc.)
_____ b. Health Services (immunizations, screenings, etc.)
_____ c. Health School Environment (asbestos abatement, safe environment, etc.)
_____ d. Coordination

5. Anticipated years of operation

x a. Ongoing
x b. FY 1983
_____ c. FY 1984
_____ d. Other _______________ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
_____ c. College Students
x d. Faculty and Staff
_____ e. Environmental
_____ f. General Public
x g. Parents
_____ h. Other

7. Brief description

This year Browning Public Schools became the first Montana school system to adopt a new health curriculum.

The process began last spring (1982) when several administrators and teachers traveled to Pine Ridge, S.D. to view the School Health Curriculum Project (CDC) in action in various elementary schools jointly controled and operated by the BIA and Indian tribes. The group recommended adoption of the curriculum.

Eight consultants from the Rocky Mountain Regional Training Center, Denver, Colorado trained approximately sixty administrators, teachers and teacher assistants. The training enabled all of the participants to review curriculum content, construct educational materials, and, in general, become certified School Health Curriculum Project instructors.

This fall students in grades K-8 began to receive instruction in the new health curriculum.

The foregoing is an example of efforts to better coordinate and incorporate health instruction in the curriculum of BIA and tribally controlled schools including Public Schools that have a large Indian enrollment.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service

2. Project/Activity Title Health Promotion

3. Contact for further information:

Name Marland Koomsa

Title Chief, Health Education Branch

Street 5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1870

4. Category

X a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
___ c. College Students
___ d. Faculty and Staff
___ e. Environmental
X f. General Public
X g. Parents
___ h. Other

7. Brief description

Development and implementation of a "Wellness" course consisting of five, two-hour sessions on the following topics: physical fitness, coping with stress, weight control and medical self-help.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service

2. Project/Activity Title Family Life Education

3. Contact for further information:

Name Marland Koomsa

Title Chief, Health Education Branch

Street 5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1870

4. Category

X a. Health Education (information, curriculum, etc.)
b. Health Services (immunizations, screenings, etc.)
c. Health School Environment (asbestos abatement, safe environment, etc.)
d. Coordination

5. Anticipated years of operation

X a. Ongoing
b. FY 1983
c. FY 1984
d. Other
(describe)

6. Target Group

a. Primary Grade Students
X b. Secondary Students
X c. College Students
d. Faculty and Staff
e. Environmental
f. General Public
X g. Parents
h. Other

7. Brief description

Provide limited and direct instructional service with BIA staff in the teaching of Family Life courses which include sex education, V.D., emotions, building of self-esteem, birth control, parenting and nutrition.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service

2. Project/Activity Title Alcohol and Drug Abuse

3. Contact for further information:

Name Marland Koomsa

Title Chief, Health Education Branch

Street 5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1870

4. Category

X a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other __________ (describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
X c. College Students
X d. Faculty and Staff
___ e. Environmental
X f. General Public
X g. Parents
___ h. Other

7. Brief description

The hazards of alcohol and other dangerous drugs are integrated into the school health curriculum. These programs focus on smoking cessation, poison prevention, alcohol/drug abuse, and dissemination of information via media and "tribal networking".

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service

2. Project/Activity Title Health Careers

3. Contact for further information:

Name Marland Koomsa

Title Chief, Health Education Branch

Street 5600 Fishers Lane

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1870

4. Category

X a. Health Education (information, curriculum, etc.)
____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
____ d. Coordination

5. Anticipated years of operation

X a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
____ c. College Students
____ d. Faculty and Staff
____ e. Environmental
____ f. General Public
X g. Parents
____ h. Other

7. Brief description

Promoting health careers among students, providing individual assistance to students for job and career counseling, and assist in the coordination of health career workshops and fairs.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Indian Health Service/Nutrition and Dietetics Branch

2. Project/Activity Title School Health Activities

3. Contact for further information:

Name Patricia F. Roseleigh, R.D., M.S.

Title Chief, Nutrition and Dietetics Branch, IHS, HRSA

Street 5600 Fishers Lane, Parklawn Building, Room 5A-10

City Rockville State Maryland Zip Code 20857

Telephone (301) 443-1114

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. **Target Group**

X a. Primary Grade Students
X b. Secondary Students
X c. College Students
X d. Faculty and staff
___ e. Environmental
___ f. General Public
X g. Parents
X h. Other Head Start
(describe)

7. **Brief description**

The professional staff of the Nutrition and Dietetics Branch, IHS, provides consultation, nutrition education programs, in-service training for faculty and staff and technical assistance to Bureau of Indian Affairs Schools, public and private schools on Indian lands.

Examples of some activities are:

1) In the Albuquerque Area, planning curriculum committee with faculty of BIA schools for students K-8.

2) Interagency involvement in the Cherokee (N.C.) Elementary School and High School Food and Nutrition Education Curriculum developed under IHS contract.

3) Preplanned in-service training and education with cafeteria personnel, BIA, in the Portland Area.

4) Special diet counseling to individual students upon referral.

5) Nutrition education programs for both PTA's and Head Start Programs which include parental involvement.

National Institutes of Health

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Agency National Institutes of Health

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The primary mission of the National Institutes of Health (NIH) is to support the discovery of new knowledge that will improve the prevention, diagnosis, and treatment of diseases. NIH pursues that mission by: supporting the research of non-Federal scientists in universities, medical schools, hospitals, and research institutions throughout the united States and abroad; helping in the training of research investigators; fostering the continuing development of biomedical communications; and conducting research in its own laboratories.

The Institutes were established by a series of several acts of Congress, between 1930 and 1974, and succeeding legislation has further amended Institute mandates. Congress organized the NIH around specific disease areas; in addition, there is cooperation and interaction among the Institutes on topics of mutual concern.

The Institutes and their responsibilities (as reflected in their names) are: National Cancer Institute (NCI); National Eye Institute (NEI); National Heart, Lung, and Blood Institute (NHLBI); National Institute of Allergy and Infectious Diseases (NIAID); National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases (NIADDK); National Institute of Child Health and Human Development (NICHD); National Institute of Dental Research (NIDR); National Institute of General Medical Sciences (NIGMS); National Institute of Neurological and Communicative Disorders and Stroke (NINCDS); and National Institute on Aging (NIA). In addition, NIH includes the National Library of Medicine (NLM), a Clinical Center, an International Center, and several administrative divisions.

Thus, the primary role for NIH in school health is to provide the fundamental base of health knowledge on which education, service, and environment programs can be built. Without a specific mandate for school health per se, the various Institutes all relate to issues and concerns about the current and future health of children. Each Institute works toward the prevention of disease in its particular area(s), and makes information available to many organizations and individuals working on the same health topics.

In addition, certain of the Institutes have specific mandates for education-related activities to disseminate health information. Several of these, as detailed on the following pages, relate to schools and youth.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Heart, Lung, and Blood Institute - NIH
2. Project/Activity Title Concepts and Skills for Understanding and Using News from Health Research
3. Contact for further information:

Name Jane A. Jacobs

Title Coordinator, School and Youth Health Education

Street National Heart, Lung, and Blood Inst., Bldg. 31, Rm. 4A 18

City Bethesda, State Maryland Zip Code 20205

Telephone (301) 496-1051

4. Category

XX a. Health Education (Information, Curriculum etc.)
____ b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination

5. Anticipated years of operation

XX a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ________ (describe)

6. Target Group

_____ a. Primary Grade Students
XX b. Secondary Students
XX c. College Students
XX d. Faculty and staff

_____ e. Environmental
_____ f. General Public
_____ g. Parents
_____ h. Other _____________ (describe)

7. Brief description

See attached page on description of Concepts and Skills for Understanding and Using News from Health Research

Concepts and Skills for Understanding and Using News from Health Research

Students exposed to health education usually learn about self-responsibility for healthy lifestyles; basic anatomy and physiology; "current facts" about how the functioning of their body systems is affected by factors like what kinds of foods they eat, whether and how they exercise, whether they smoke, whether they take drugs, etc.; and some specific decision-making skills, like how to respond to peer pressure and how to weigh alternative behaviors.

Many of the "facts" about preventing disease are still controversial, however; note passive smoking, "ideal weight", the role of salt in high blood pressure, the long-term effects of marijuana, the role of stress in disease, cholesterol, birth control pills, and carcinogens in our daily environment as just a few examples. In addition, many of today's "facts" will be revised by the findings of future research. Some will be further substantiated; others will be "disproven" and replaced by more accurate information. Meanwhile, news about health research findings, on both controversial and new topics, appears very often in magazines and newspapers, and in television and radio reports, and often seems conflicting and confusing to the public.

The Office of Prevention, Education, and Control at the National Heart, Lung, and Blood Institute (NHLBI) is working on a project to help students understand and use reports of new health information as it is discovered and publicized, so that they can make more informed health decisions in the present and throughout their lives. The project includes a set of basic concepts about the research process and how it applies to health recommendations; a set of "critical thinking questions" and how to apply them to specific reports of health news; and suggestions on how to obtain further information about particular health topics.

In cooperation with the Center for Health Promotion and Education, Centers for Disease Control, and the Education Development Center (Newton, Massachusetts), a prototype classroom module for teaching these concepts and skills has been developed, pilot tested, and revised. The module is one of the "Teenage Health Teaching Modules" series, is titled "Using New Health Research", and is scheduled to be available later this year.

NHLBI welcomes comments on this project, and will be exploring: further testing of the effects of teaching the concepts and skills; use of the concepts and skills by various age groups and in various settings; potential integration of the concepts and skills into professional preparation programs.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Heart, Lung, and Blood Institute

2. Project/Activity Title Dissemination of Research Information

3. Contact for further information:

Name Jane A. Jacobs

Title Coordinator, School and Youth Health Education

Street Nat'l. Heart, Lung, and Blood Inst., Bldg. 31 Rm. 4A 18

City Bethesda, State Maryland Zip Code 20205

Telephone (301) 496-1051

4. Category

XX a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

XX a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

_____ a. Primary Grade Students
_____ b. Secondary Students
_____ c. College Students
* XX d. Faculty and staff

_____ e. Environmental
_____ f. General Public
_____ g. Parents
X h. Other _____________
(describe)

*(For further dissemination to students in K-college, and to parents where appropriate)

7. Brief description

See attached page for description on Dissemination of Research Information.

Dissemination of Research Information

The primary responsibility of the National Heart, Lung, and Blood Institute (NHLBI) is supporting the discovery of new research findings to help prevent, diagnose, and treat heart, lung, and blood diseases. Traditionally, these findings have been, and still are, presented at scientific conferences and in professional journals. Since Congress enacted expanded madates for the Institute in the 1970's, NHLBI has developed a number of additional dissemination activities for both health professionals and the general public.

Beginning with the National High Blood Pressure Education Program, the Institute has organized many of its education and dissemination activities around certain target groups. "Schools and Youth" is the latest addition to those groups, and is gradually becoming integrated into the ongoing activities for information on a variety of topics related to heart, lung, and blood disease prevention.

The emphasis for dissemination of research information to the school health community is on cooperating with other health-related organizations and using existing communication networks. This program strategy has been a useful partnership for both the Institute, with information to disseminate, and school health organizations who want to keep their members informed about research findings.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. Agency National Heart, Lung, and Blood Institute

2. Project/Activity Title CV Family Risk is Modifiable: A Multiple Community Study

3. Contact for further information:

Name Elaine J. Stone, Ph.D

Title Health Scientist Administrator/PCB

Street 7550 Wisconsin Avenue, Fed. Bldg., Room 6A-12

City Bethesda State Maryland Zip Code 20205

Telephone (301) 496-2465

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

___ a. Ongoing
X b. FY 1983
X c. FY 1984
X d. Other 1985, 1986, 1987 (describe)

6. Target Group

____ a. Primary Grade Students
X b. Secondary Students
____ c. College Students
____ d. Faculty and staff

____ e. Environmental
____ f. General Public
X g. Parents
____ h. Other ____________ (describe)

7. Brief description

This is a five year research study designed to modify the acquired cardiovascular risk behavior of a population of tenth grade high school students and their parents in two Texas communities. The proposed project seeks to enhance family support for preventive health practices and to determine whether families with positive family histories for cardiovascular disease are likely to respond more favorably 1) to a high school cardiovascular health curriculum, 2) to a generalized parent heart health education program, or 3) to an intensive twenty session intervention program for high risk families, then do families with negative histories for premature cardiovascular mortality and morbidity. Families' and parents' risk would be determined using the Family Tree questionnaire.

This research study is at Baylor College of Medicine. The Principal Investigator is Dr. Ralph Ingersoll.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Heart, Lung, and Blood Institute

2. **Project/Activity Title** Chicago Heart Health
Curriculum Program

3. **Contact for further information:**

Name Elaine J. Stone, Ph.D.
Title Preventive Cardiology Branch/NHLBI /PCB
Street 7550 Wisconsin Avenue. Federal Bldg., Room 6A-12
City Bethesda **State** Maryland **Zip Code** 20205
Telephone (301) 496-2465

4. **Category**

X a. **Health Education (Information, Curriculum etc.)**
___ b. **Health Services (Immunizations, Screenings etc.)**
___ c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
___ d. **Coordination**

5. **Anticipated years of operation**

___ a. **Ongoing**
X b. **FY 1983**
X c. **FY 1984**
X d. **Other** 1985
(describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
____ c. College Students
____ d. Faculty and staff
X e. Environmental
____ f. General Public
X g. Parents
____ h. Other ____________
(describe)

7. Brief description

he original three years of this research grant involved the study of the effects of a teacher delivered heart health curriculum called "Body Power" for sixth grade students in the Chicago public schools.

The Chicago Heart Health Curriculum Program (CHHCP) has demonstrated that both the student intervention and the family intervention are effective in significantly increasing Chicago public school students' and their family members' knowledge, attitudes and behaviors in a heart health direction. The program has produced a vast data based on students, teachers, and family members. Only preliminary analyses of these data were completed at the end of the current funding period.

The project has been awarded funds for two more years, 1983-85, to complete data analysis of the large data base and to prepare a monograph describing the project and the results as well as to prepare articles for professional journals.

Dr. James Schoenberger and Dr. Albert Sunseri are Co-Principal Investigators.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Heart, Lung, and Blood Institute

2. **Project/Activity Title** Coronary Risk Factor Intervention in Childhood

3. **Contact for further information:**

Name Elaine J. Stone, Ph.D.
Title Health Scientist Administrator/PCB
Street 7550 Wisconsin Avenue Fed. Bldg., Room 6A-12
City Bethesda **State** Maryland **Zip Code** 20205
— **Telephone** (301) 496-2465

4. **Category**

X a. **Health Education (Information, Curriculum etc.)**
X b. **Health Services (Immunizations, Screenings etc.)**
___ c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
___ d. **Coordination**

5. **Anticipated years of operation**

___ a. **Ongoing**
X b. **FY 1983**
X c. **FY 1984**
X d. **Other** 1985
(describe)

6. **Target Group**

X a. Primary Grade Students
X b. Secondary Students
c. College Students
d. Faculty and staff

X e. Environmental
f. General Public
X g. Parents
h. Other
(describe)

7. **Brief description**

This research study (1982-1985) is designed to complete the final three-year phase (grades 7-9) of a six-year longitudinal study begun in 4th grade among a cohort of children born in 1970. The study is designed to evaluate the effectiveness of a health education curriculum in modifying the cognitive, affective, psychosocial and behavioral factors hypothesized to relate to CHD risk. Classroom teachers will continue to provide primary instruction, as they did in the first phase of the study. The specific behaviors targeted for intervention continue to be habitual dietary intake, cigarette smoking and physical exercise. This second phase of the six-year study will be conducted among the same cohort of students as in the first phase. The intervention group (3 districts, N=600 students) will receive a classroom curriculum focusing on nutrition, cigarette smoking prevention and self-responsibility for health. The control group (3 districts, N=600 students) will not receive the curriculum. Both groups will be evaluated periodically for cognitive, affective, psychosocial, behavioral and biomedical risk indicators (dependent variables). Comparisons between the intervention and control groups will be made with respect to these dependent variables. This integrated program of clinical and behavioral research is intended to provide new knowledge and risk factors for cardiovascular disease in adolescents and improved methods for school-based, primary prevention programs. The Co-Principal Investigators are Dr. Charles Arnold and Dr.Heather Walter with the American Health Foundation.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March ~~8~~, 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Heart, Lung, and Blood Institute

2. **Project/Activity Title** School-based Relaxation to Lower Blood Pressure

3. **Contact for further information:**

Name Katrina W. Johnson, Ph.D.

Title Health Scientist Administrator

Street Behavioral Medicine Branch
Federal Building, Room 604, NIH
7550 Wisconsin Avenue

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-9380

4. **Category**

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. **Anticipated years of operation**

X a. Ongoing
X b. FY 1983
X c. FY 1984
X d. Other FY 1985
(describe)

6. **Target Group**

____ a. **Primary Grade Students**
__X__ b. **Secondary Students** 9th & 10th grade
____ c. **College Students**
____ d. **Faculty and staff**
____ e. **Environmental**
____ f. **General Public**
__X__ g. **Parents**
____ h. **Other** ____________ (describe)

7. **Brief description**

The specific aims of this project are to (1) investigate the short- and long-term effects of relaxation on elevated blood pressure in adolescents when it is taught and practiced on a regular basis in the school classroom, and (2) investigate the efficacy of parent and peer support strategies in facilitating maintenance of blood pressure lowered through relaxation. Study 1 will involve two schools, each receiving a replication of the entire experiment. Students in the 9th and 10th grades will have a blood pressure screening and local norms will be developed. Those above the 90th percentile systolic or diastolic will be invited to participate in health education classes offered for credit for one semester during regular class time. Students will be assigned at random to one of three groups: health education + relexation, health education alone, or to a delayed treatment control (to receive treatment the next semester). Follow-up evaluations will be conducted at 6, 12, 18, and 24 months following treatment. Study 2 will involve four schools. Screening will proceed as in Study 1 and all students will receive health education + relaxation. School 1 will receive parent and peer support strategies; school 2 will receive parent support only; school 3 will receive peer support only; school 4 will receive no support strategies. Blood pressures will be assessed pre, mid, and post, and at six and twelve months following treatment.

The school-based strategies could be significant in providing a cost-effective method for lowering blood pressure in adolescents at risk for developing hypertension. The scientific and clinical benefits of the school-based treatment delivery allow for increased compliance (treatment will be administered in class), increased maintenance (through the use of peer and parent support structures), and in allowing easy treatment delivery in a naturalistic setting at minimal response cost to the participant.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Lung Diseases, National Heart, Lung & Blood Institute

2. Project/Activity Title School Health Education Project of the Vermont Lung Center
~~Grant Number: 2 P60 HL 17292~~

3. Contact for further information:

Name Dr. Sydney Parker

Title Chief, Prevention, Education, Manpower Branch, DLC

Street NHLBI, NIH Westwood Building Room 6A 12

City Bethesda State Maryland Zip Code 20815

Telephone (301) 496-7668

4. Category

x a. Health Education (Information, Curriculum etc.)
____ b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination

5. Anticipated years of operation

____ a. Ongoing
____ b. FY 1983
____ c. FY 1984
X d. Other FY 1979-1982
(describe)

274

6. **Target Group**

___X___ a. Primary Grade Students
______ b. Secondary Students
______ c. College Students
______ d. Faculty and staff
______ e. Environmental
______ f. General Public
______ g. Parents
______ h. Other ______________
(describe)

7. **Brief description**

Two strategies for assisting adolescents in coping with pressures to smoke are being tested in a rural setting. The programs are both teacher led and student led programs. The outcome to be measured is the percentage of children who take up smoking. The project will study the feasibility and cost effectiveness of delivering these two smoking prevention programs in Vermont.

Roger Sucker-Walker, M.D., of the Vermont Lung Center, the University of Vermont is the principal investigator of this project.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Division of Lung Diseases, National Heart, Lung, and Blood Institute

2. Project/Activity Title Health Education in Self-Management of Childhood Asthma Grant No. 1 R18 HL28907-01

3. Contact for further information:

Name Dr. Sydney Parker

Title Chief, Prevention Education and Manpower Branch
Division of Lung Diseases

Street Westwood Building, Room 6A12, NIH

City Bethesda State Maryland Zip Code 20815

Telephone (301) 496-7668

4. Category

x a. Health Education (information, curriculum, etc.)
___ b. Health Services (immunizations, screenings, etc.)
___ c. Health School Environment (asbestos abatement, safe environment, etc.)
___ d. Coordination

5. Anticipated years of operation

x a. Ongoing
x b. FY 1983
x c. FY 1984
x d. Other FY 82-87 (describe)

6. Target Group

___ a. Primary Grade Students
___ b. Secondary Students
___ c. College Students
___ d. Faculty and Staff
___ e. Environmental
___ f. General Public
___ g. Parents
___ h. Other

6. **Target Group**

____X____ a. Primary Grade Students
________ b. Secondary Students
________ c. College Students
________ d. Faculty and staff
________ e. Environmental
________ f. General Public
________ g. Parents
________ h. Other ________________
(describe)

7. **Brief description**

The program tested will demonstrate the feasibility of delivering an asthma self-management progra, previously tested in a clinical setting, in a school system. Asthmatic children in two schools will receive the asthma education program during the first year, and outcomes will be cmpared with outcomes regarding asthmatic children in two control schools. The control schools will receive the educational programs in the second year. Outcomes measured will include health care utilization data, school absenteeism, severity of asthma, self management activities, and family and child functioning.

Dr. Robert B. Mellins at Columbia University College of Physicians and Surgeons, New York City, is the principal investigator of this project.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, PHS, DHHS

2. **Project/Activity Title** Smoking Prevention Training for Youth
(grant R18-CA-29640, Univ. of Washington)

3. **Contact for further information:**

Name Joseph Cullen, Ph.D.

Title Deputy Director, Div. of Resources, Centers, and Community Activities

Street National Cancer Institute, Bldg. 31/Room 4A32

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-9569

4. **Category**

- ☒ a. **Health Education (Information, Curriculum etc.)**
- ☐ b. **Health Services (Immunizations, Screenings etc.)**
- ☐ c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
- ☐ d. **Coordination**

5. **Anticipated years of operation**

- ☐ a. **Ongoing**
- ☒ b. **FY 1983**
- ☒ c. **FY 1984**
- ☐ d. **Other** ______________
(describe)

6. **Target Group**

__X__ a. Primary Grade Students
_____ b. Secondary Students
_____ c. College Students
_____ d. Faculty and staff
_____ e. Environmental
_____ f. General Public
_____ g. Parents
_____ h. Other _____________ (describe)

7. **Brief description**

The purpose of this grant is to design, implement, and evaluate a self-control, skills training program to prevent the onset of smoking among adolescents. The target population is 355 sixth graders. Smoking prevention curricula have been developed and delivered. Initial assessment and three month follow-up data have been collected to date and are undergoing analysis.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, PHS, DHHS

2. **Project/Activity Title** Smoking Prevention and Youth: Motivational Strategies
(Project RAY:S - Risk and Youth: Smoking)
(grant R18-CA-29558, Univ. of Calif. at Berkeley)

3. **Contact for further information:**

Name Joseph Cullen, Ph.D.

Title Deputy Director, Div. of Resources, Centers, and Community Activities

Street National Cancer Institute, Bldg. 31/Room 4A32

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-9569

4. **Category**

X **a. Health Education (Information, Curriculum etc.)**
b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
d. Coordination

5. **Anticipated years of operation**

a. Ongoing
b. FY 1983
X **c. FY 1984**
d. Other ______________
(describe)

6. **Target Group**

X a. **Primary Grade Students**
X b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**
_____ e. **Environmental**
_____ f. **General Public**
_____ g. **Parents**
_____ h. **Other** _____________ (describe)

7. **Brief description**

The overall objective of this grant is to develop effective, widely applicable educational intervention activities which will increase the ability of young people to make informed decisions about their smoking and health behavior. Findings will be used to develop practical, school-based interventions for preventing smoking and tobacco use. More than 7,000 interviews among sixth, eighth, and tenth graders in San Francisco have been completed and form the basis for the development and testing of intervention strategies.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 11, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Cancer Institute, NIH, PHS, DHHS

2. Project/Activity Title Primary Prevention of Cancer in Childhood
(grant R18-CA-25521-04, American Health Foundation)

3. Contact for further information:

Name Joseph Cullen, Ph.D.

Title Deputy Director, Div. of Resources, Centers, and Community Activities

Street National Cancer Institute, Bldg. 31/Room 4A32

City Bethesda State Maryland Zip Code 20205

Telephone (301) 496-9569

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

___ a. Ongoing
___ b. FY 1983
___ c. FY 1984
X d. Other FY80 - FY85
(describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
c. College Students
d. Faculty and staff
e. Environmental
f. General Public
g. Parents
h. Other (describe)

7. Brief description

This grant is for a six-year longitudinal study in a cohort of children born in 1970. The study began when the cohort was in the fourth grade and is currently in its fourth year of intervention and data collection. The study is designed to evaluate the effectiveness of a health education curriculum in modifying the cognitive, affective, psychosocial, and behavioral factors hypothesized to relate to cancer risk. Classroom teachers provide the primary instruction. The specific behaviors targeted for intervention are cigarette smoking and habitual dietary intake. The study will be conducted among 1500 students in the Bronx, New York. The intervention group (5 schools) receives a curriculum focusing on cigarette smoking prevention, nutrition, and self-responsibility for health. The control group does not receive the curriculum. Both groups are evaluated for cognitive, affective, psychosocial, behavioral, and biomedical risk indicators (dependent variables).

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. Agency National Cancer Institute, NIH, PHS, DHHS

2. Project/Activity Title Smokeless Tobacco and Non-Tobacco Smoking Product Use: Identification of Initiation Mechanisms in Children and Adolescents

3. Contact for further information:

Name Joseph Cullen, Ph.D.

Title Deputy Director, Div. of Resources, Centers, and Community Activities

Street National Cancer Institute, Bldg. 31/Room 4A32

City Bethesda State Maryland Zip Code 20205

Telephone (301) 496-9569

4. Category

X a. Health Education (Information, Curriculum etc.)
____ b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination

5. Anticipated years of operation

____ a. Ongoing
X b. FY 1983
X c. FY 1984
____ d. Other ____________
(describe)

6. Target Group

_X_ a. Primary Grade Students
_X_ b. Secondary Students
____ c. College Students
____ d. Faculty and staff

____ e. Environmental
____ f. General Public
____ g. Parents
____ h. Other ________
(describe)

7. Brief description

This program announcement was issued in FY83 to encourage research activities which will: (1) identify factors that lead to the use of smokeless tobacco and/or non-tobacco smoking products by children and adolescents; (2) identify those conditions which may lead to shifts in tobacco usage patterns; and (3) develop prevention and cessation strategies which can be integrated into school based health and/or anti-smoking programs.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, PHS, DHHS

2. **Project/Activity Title** Develop Effective Methods for Modifying Smoking Behavior in Special At-Risk Populations (contract NO1-CN-95469, Univ. of Houston)

3. **Contact for further information:**

Name Joseph Cullen, Ph.D.

Title Deputy Director, Div. of Resources, Centers, and Community Activities

Street National Cancer Institute, Bldg. 31/Room 4A32

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-9569

4. **Category**

X a. **Health Education (Information, Curriculum etc.)**
b. **Health Services (Immunizations, Screenings etc.)**
c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
d. **Coordination**

5. **Anticipated years of operation**

a. **Ongoing**
X b. **FY 1983**
c. **FY 1984**
d. **Other** ____________
(describe)

6. **Target Group**

_____ a. **Primary Grade Students**
__x__ b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**
_____ e. **Environmental**
_____ f. **General Public**
_____ g. **Parents**
_____ h. **Other** ____________
(describe)

7. **Brief description**

The purpose of this contract is to: (1) assess cigarette smoking behavior and the social-psychological factors which influence or inhibit smoking onset in teenage females; (2) assess knowledge concerning the physiological effects of cigarette smoking; (3) develop an intervention program utilizing films and follow-up discussions; and (4) implement and evaluate this intervention program with junior high school students. Six experimental and ten control schools with a pre-test and multiple post-test design within a quasi-experimental framework (modified time series) are participating. Data has been collected and is being analyzed.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, PHS, DHHS

2. **Project/Activity Title** Smoking Prevention in School Age Populations

3. **Contact for further information:**

Name Joseph Cullen, Ph.D.

Title Deputy Director, Div. of Resources, Centers, and Community Activities

Street National Cancer Institute, Bldg. 31/Room 4A32

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-9569

4. **Category**

X a. **Health Education (Information, Curriculum etc.)**
____ b. **Health Services (Immunizations, Screenings etc.)**
____ c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
____ d. **Coordination**

5. **Anticipated years of operation**

____ a. **Ongoing**
____ b. **FY 1983**
X c. **FY 1984**
____ d. **Other** ____________ **(describe)**

6. **Target Group**

X a. Primary Grade Students
X b. Secondary Students
___ c. College Students
___ d. Faculty and staff
___ e. Environmental
___ f. General Public
___ g. Parents
___ h. Other ______________ (describe)

7. **Brief description**

As part of its forward planning for NCI's Smoking, Tobacco, and Cancer Program, the Division of Resources, Centers, and Community Activities has assembled working groups of recognized experts to review the state-of-the-art and to make specific recommendations for research and program activities in five areas of interest. One of these is smoking prevention programs targeted at schools age youth. A Request for Applications (RFA) is currently being developed based on the recommendations of this working group. It is expected to be released in late FY83 for funding of approved applications in FY84. The focus of this RFA will be on smoking prevention interventions applied in school settings, with long-term follow-up which addresses the major methodological issues that have been encountered in previous studies of this type.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, PHS, DHHS

2. **Project/Activity Title** Environmental Cancer Prevention and Labor Education (contract NO1-CN-27757, Johns Hopkins Univ.)

3. **Contact for further information:**

Name Veronica Conley, Ph.D.

Title Acting Branch Chief, Occupational Medicine Branch

Street National Cancer Institute, Blair Bldg. Room 614A, 8300 Colesville Rd.

City Silver Spring **State** Maryland **Zip Code** 20910

Telephone (301) 427-8633

4. **Category**

X a. **Health Education (Information, Curriculum etc.)**
b. **Health Services (Immunizations, Screenings etc.)**
c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
d. **Coordination**

5. **Anticipated years of operation**

a. **Ongoing**
X b. **FY 1983**
c. **FY 1984**
d. **Other** ______
(describe)

6. **Target Group**

_____a. Primary Grade Students
_____b. Secondary Students
__X__c. College Students
_____d. Faculty and staff

_____e. Environmental
_____f. General Public
_____g. Parents
_____h. Other _____________
(describe)

7. **Brief description**

The purpose of this contract is to develop a model health education program on occupational and environmental carcinogenic hazards. The primary target population is industrial workers enrolled at Empire State College. The program includes direct instruction in formal course work and individualized study projects, and the identification of mechanisms to disseminate cancer education material and information. The study has been implemented through the curriculum at the College Center for Labor Studies where approximately 1500 adult students representing 50 labor unions are enrolled, and through individualized and group study at the Northeast Regional Center (Albany) of Empire State College.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute

2. **Project/Activity Title** Cancer Control Research Units (CCRU) and Cancer Control Science Programs (CCSP)

3. **Contact for further information:**

Name Carlos Caban, Ph.D.

Title Acting Chief, Cancer Control Science Branch

Street Blair Building Room 716B, 8300 Colesville Rd.

City Silver Spring **State** Maryland **Zip Code** 20910

Telephone (301) 427-8663

4. **Category**

X **a. Health Education (Information, Curriculum etc.)**
___ **b. Health Services (Immunizations, Screenings etc.)**
___ **c. Health School Environment (Asbestos Abatement, Safe environment etc.)**
___ **d. Coordination**

5. **Anticipated years of operation**

___ **a. Ongoing**
X **b. FY 1983**
X **c. FY 1984**
X **d. Other** FY85 - FY87
(describe)

6. **Target Group**

__X__ a. **Primary Grade Students**
__X__ b. **Secondary Students**
_____ c. **College Students**
_____ d. **Faculty and staff**
_____ e. **Environmental**
_____ f. **General Public**
_____ g. **Parents**
_____ h. **Other** __________ (describe)

7. **Brief description**

The purpose of the Cancer Control Science Unit RFA and the Cancer Control Science Program PA is to stimulate research on cancer control interventions in defined populations. A total of 28 applications have been received and are under review at this time. These contain 142 separate studies, 11 of which are school based. Three additional applications have just been received for FY84 funding consideration.

Information requested for "Interagency Meeting on Health Promotion
Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. Agency National Cancer Institute

2. Project/Activity Title Cancer Communications Network

3. Contact for further information:

Name Judith Stein

Title Project Officer, Div. of Resources, Centers, and Community Activities

Street National Cancer Institute, Bldg. 31/Room 4B39

City Bethesda State Maryland Zip Code 20205

Telephone (301) 496-6792

4. Category

- X a. Health Education (Information, Curriculum etc.)
- ___ b. Health Services (Immunizations, Screenings etc.)
- ___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- ___ d. Coordination

5. Anticipated years of operation

- X a. Ongoing
- ___ b. FY 1983
- ___ c. FY 1984
- ___ d. Other ________ (describe)

6. Target Group

_____a. Primary Grade Students
_____b. Secondary Students
_____c. College Students
_____d. Faculty and staff
_____e. Environmental
_X__f. General Public
_____g. Parents
_____h. Other __________ (describe)

7. Brief description

The objective of the Cancer Communications Network is to assure that the public and health professionals have ready access to the latest information on cancer. Seventeen regional offices provide this access through a telephone information network and other educational/informational projects designed to meet regional needs. Several CCN offices provide direct support to schools through presentations to students and/or newsletters for faculty. All offices respond to student and faculty inquiries through their telephone information services.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 9, 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, PHS, DHHS

2. **Project/Activity Title** Students with Cancer: A Resource for the Educator

3. **Contact for further information:**

Name Barbara Blumberg

Title Public Health Educator, Office of Cancer Communications

Street National Cancer Institute, Bldg. 31/Room 4B39

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-6792

4. **Category**

X a. **Health Education (Information, Curriculum etc.)**
___ b. **Health Services (Immunizations, Screenings etc.)**
___ c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
___ d. **Coordination**

5. **Anticipated years of operation**

X a. **Ongoing**
___ b. **FY 1983**
___ c. **FY 1984**
___ d. **Other** __________ **(describe)**

6. **Target Group**

_____ a. **Primary Grade Students**
_____ b. **Secondary Students**
_____ c. **College Students**
__X__ d. **Faculty and staff**
_____ e. **Environmental**
_____ f. **General Public**
_____ g. **Parents**
_____ h. **Other** ____________ (describe)

7. **Brief description**

STUDENTS WITH CANCER: A RESOURCE FOR THE EDUCATOR (NIH Publication # 80-2086) is a 24 page booklet of useful information for the educator to assist them in dealing with young people who have cancer, their classmates, and parents. The booklet contains guidelines for school reentry as well as information on additional materials and organizations. The publication has been widely distributed and is endorsed by: National Association of School Nurses, Inc,; National Association of Elementary School Prinipals; National Association of Secondary School Principals; American School Health Association; and the American Federation of Teachers/Federation of Nurses and Health Professionals, AFL/CIO.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. Agency National Cancer Institute, NIH, PHS, DHHS

2. Project/Activity Title Help Yourself - Tips for Teenagers with Cancer

3. Contact for further information:

Name Barbara Blumberg

Title Public Health Educator, Office of Cancer Communications

Street National Cancer Institute, Bldg. 31/Room 4B39

City Bethesda State Maryland Zip Code 20205

Telephone (301) 496-6792

4. Category

X a. Health Education (Information, Curriculum etc.)
____ b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
____ d. Coordination

5. Anticipated years of operation

X a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________
(describe)

6. Target Group

_____ a. Primary Grade Students
__x__ b. Secondary Students
_____ c. College Students
__x__ d. Faculty and Staff
_____ e. Environmental
_____ f. General Public
_____ g. Parents
_____ h. Other

7. Brief description

HELP YOURSELF - TIPS FOR TEENAGERS WITH CANCER is an educational unit consisting of a 40 page booklet and a 40 minute audiotape for patients and the public, and a user's guide for professionals. These materials were produced by Adria Laboratories, Inc. in cooperation with the NCI. These materials address issues of concern to adolescents with cancer, including diagnosis, relationships with family and friends, treatment, recurrence and the future. They are designed to: (1) enhance communications with parents, peers, and caregivers; (2) increase the patient's ability to cope with the disease by offering examples of how other adolescents have dealt with it; and (3) reduce the patient's sense of isolation and of being different. While this unit was designed for use in multiple settings, it has been utilized in schools as well.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, DHHS, PHS

2. **Project/Activity Title** Smoking Programs for Youth

3. **Contact for further information:**

Name Nancy McCormick Pickett

Title Special Assistant, Office of Cancer Communications

Street National Cancer Institute, Bldg. 31/Room 4B39

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-6792

4. **Category**

- ☒ a. Health Education (Information, Curriculum etc.)
- ☐ b. Health Services (Immunizations, Screenings etc.)
- ☐ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- ☐ d. Coordination

5. **Anticipated years of operation**

- ☒ a. Ongoing
- ☐ b. FY 1983
- ☐ c. FY 1984
- ☐ d. Other ______ (describe)

300

6. **Target Group**

_____a. **Primary Grade Students**
_____b. **Secondary Students**
_____c. **College Students**
__X__d. **Faculty and staff**
_____e. **Environmental**
__X__f. **General Public**
__X__g. **Parents**
_____h. **Other** ____________ (describe)

7. **Brief description**

SMOKING PROGRAMS FOR YOUTH (NIH Publication # 80-2156) is a 92 page book that provides basic information on smoking in teenage populations and action oriented guidelines and suggestions for developing smoking prevention and cessation programs for them. It is divided into four sections: (1) Teenage Smoking in America; (2) Approaches to Smoking in Schools: Regulation and Education; (3) How to Develop a School Smoking Program; and (4) Current Smoking Education Programs. This publication has been widely distributed and is endorsed by many health and school related organizations.

FORM B

Information requested for "Interagency Meeting on Health Promotion
Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. **Agency** National Cancer Institute, NIH, PHS, DHHS

2. **Project/Activity Title** The Good Neighbor Program

3. **Contact for further information:**

Name Kay Robichaud

Title Pediatric Program Specialist

Street NCI Pediatric Branch, Building 10, Rm. 13N240

City Bethesda **State** Maryland **Zip Code** 20205

Telephone (301) 496-5007 or 496-4256

4. **Category**

X a. **Health Education (Information, Curriculum etc.)**
___ b. **Health Services (Immunizations, Screenings etc.)**
___ c. **Health School Environment (Asbestos Abatement, Safe environment etc.)**
___ d. **Coordination**

5. **Anticipated years of operation**

X a. **Ongoing**
___ b. **FY 1983**
___ c. **FY 1984**
___ d. **Other** __________ **(describe)**

6. **Target Group**

__X__ a. Primary Grade Students
__X__ b. Secondary Students
_____ c. College Students
__X__ d. Faculty and staff
_____ e. Environmental
__X__ f. General Public
__X__ g. Parents
_____ h. Other _____________
(describe)

7. **Brief description**

"The Good Neighbor Program" is a general health education program being conducted by the NCI Pediatric Program in the Montgomery County community. As part of its activities, presentations are offered in schools for teachers, principals, and students. Educational tools include demonstrations, lectures, puppets, "Help Yourself" tapes and booklets, and posters.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March ~~8~~ 11, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute of Dental Research

2. Project/Activity Title Teaching Primary Grade Students About Fluorides (A Film)

3. Contact for further information:

Name Alice M. Horowitz

Title Coordinator, Health Education - Health Promotion Activities
National Caries Program, NIDR

Street Westwood Building, 5333 Westbard Avenue, Room 549

City Bethesda State Maryland Zip Code 20016

Telephone (301) 496-7716

4. Category

X a. Health Education (Information, Curriculum etc.)
__ b. Health Services (Immunizations, Screenings etc.)
__ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
__ d. Coordination

5. Anticipated years of operation

X a. Ongoing
X b. FY 1983
__ c. FY 1984
__ d. Other ________ (describe)

6. Target Group

X a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
____ d. Faculty and staff
____ e. Environmental
____ f. General Public
____ g. Parents
____ h. Other ________ (describe)

7. Brief description

Although the appropriate use of fluorides is the most effective way to prevent dental caries and is well documented by research, little education is provided to students concerning this valuable preventive measure. The purpose of this film is to teach what fluorides are, how fluorides work to protect teeth from tooth decay, what methods of administration are available, the effectiveness of each procedure, and the recommended frequency of use and duration. Today no educational film on this topic exists for this age group. This film will be completed in FY 1983.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute of Dental Research

2. Project/Activity Title Preventing Tooth Decay: The Use of Self-Applied Fluorides in School-Based Settings.

3. Contact for further information:

Name Alice M. Horowitz
Title Coordinator, Health Education - Health Promotion Activities
National Caries Program, NIDR
Street Westwood Building, Room 549
5333 Westbard Avenue
City Bethesda State Maryland Zip Code 20016
Telephone (301) 496-7716

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
X c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
____ c. College Students
X d. Faculty and staff
____ e. Environmental
X f. General Public
X g. Parents
X h. Other Pre-school &
(describe)
health professionals

7. Brief description

The mission of the NIDR's National Caries Program is to eliminate dental caries (tooth decay) as a public health problem. Because of the epidemic proportions of dental caries, its economic impact and its health sequelae, the need to use proven cariostatic agents and techniques more extensively is obvious. The appropriate use of fluorides remains the most effective measure. Fluoridation of water supplies is the best community method of reducing this nearly universal disease. Unfortunately only half the U.S. population benefits from this health measure. Thus alternative methods of delivering fluoride must be adopted to reduce dental caries particularly among children, who, being most susceptible to the disease, will derive the greatest benefits. Since nearly all children attend grade school and many children attend pre-school this environment provides an excellent setting for oral health programs. The educational material developed for this project enables others to decide what fluoride regimen is needed for their community and how to implement this procedure(s). Available educational aids include a guide for implementing self-applied fluorides in school settings, educational leaflets, posters, free-loan films, and free-loan exhibits.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute of Allergy & Infectious Diseases

2. Project/Activity Title Jennifer A Revealing Story of Genital Herpes

3. Contact for further information:

Name Jonie Stefanelli

Title Office of Research Reporting & Public Response

Street NIAID-NIH/Bldg. 31/7A 32

City Bethesda State Maryland Zip Code 20205

Telephone (301) 496-9118

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

_____ a. Primary Grade Students
__x__ b. Secondary Students
_____ c. College Students
_____ d. Faculty and Staff
_____ e. Environmental
_____ f. General Public
_____ g. Parents
_____ h. Other

7. Brief description

Genital herpes affects five to ten million Americans today, a number growing by nearly 500,000 a year. There is no cure for genital herpes; only avoiding sexual contact during the period of active infection will prevent its spread. Yet many sexually active teenagers and adults are unfamiliar with its symptoms and ignorant of its contagious nature and lasting effects.

Jennifer, a 28-minute film, follows a young woman striving to cope with her own case of genital herpes. Through conversations with medical virologist Stephen Straus, M.D., and nurse practitioner Susan Bachrach, R.N., both of the National Institute of Allergy and Infectious Diseases, Jennifer begins to understand the nature of this widespread viral infection. She also begins to deal with her anger, feelings of social isolation and increasing concern with her health. These conversations are intercut with interviews with leaders in the field of genital herpes research and photographs and other illustrations of the disease process.

Jennifer offers an objective educational message for the general public while providing emotional support for persons already suffering with genital herpes.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March [illegible], 1983.
11

Please type or print - reproduce these forms as many times as necessary

1. Agency National Institute on Aging, NIH

2. Project/Activity Title "Understanding Aging" 13 minute videotape

3. Contact for further information:

Name Marsha Love
Title Public Affairs Specialist, NIA
Street 9000 Rockville Pike
City Bethesda State Md Zip Code 20205
Telephone (301) 496-1752

4. Category

- x a. Health Education (Information, Curriculum etc.)
- b. Health Services (Immunizations, Screenings etc.)
- c. Health School Environment (Asbestos Abatement, Safe environment etc.)
- d. Coordination

5. Anticipated years of operation

- a. Ongoing
- b. FY 1983
- x c. FY 1984
- d. Other if successful will continue for several years (describe)

6. Target Group

x a. Primary Grade Students
b. Secondary Students
c. College Students
d. Faculty and staff

e. Environmental
f. General Public
g. Parents
h. Other
(describe)

7. Brief description

The National Institute on Aging has produced a 13-minute videotape entitled "Understanding Aging." The purpose of this program is to introduce elementary school students, specifically 5th and 6th graders, to the concept of aging. We intend this to be the first in a series of videotapes which will focus on the subject of aging. Future programs will discuss theories of aging, special health considerations of the elderly, and how to prepare for a successful old age.
Student activities, test questions, and teacher follow-up materials will also be included in the curriculum package.

Health Care Financing Administration

HEALTH CARE FINANCING ADMINISTRATION

EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT (EPSDT) PROGRAM

Mission Statement

A preventive Medicaid program for eligible children, centered on developing and managing a comprehensive system of prevention and treatment services through:

- Outreach: seeking out Medicaid eligibles and informing them about the benefits of prevention and the health services available -- and health education: helping recipients use health care resources efficiently and effectively;

- Assessing health needs: through periodic examinations and evaluations of the general health, growth, development and nutritional status of infants, children and youth.

- Followup care and case management: to assure that health problems found are treated early, before they become more complex and their treatment more costly.

Legal Mandates

In 1967, section 1905 (a)(4)(B) of Title XIX was added to the Social Security Act to provide early and periodic screening, diagnosis and treatment for eligibles under 21. The amendment became effective July 1, 1969 and required States to ascertain these children's "physical or mental defects", and to provide "health care, treatment, and other measures to correct or ameliorate any defects and chronic conditions discovered...".

The Omnibus Budget Reconciliation Act of 1981 added section 1902(a)(44) to the Social Security Act, requiring State Medicaid plans to provide for: informing all Medicaid recipients under 21, who are eligible, of EPSDT availability; providing or arranging for requested screening services; and arranging for corrective treatment of health problems found.

In addition, the Tax Equity and Fiscal Responsibility Act of 1982 exempted Medicaid copayment requirements services provided to children under 18 (or up to 21 at State option).

Information requested for "Interagency Meeting on Health Promotion
Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Health Care Financing Administration--Dept of HHS

2. Project/Activity Title Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program of Medicaid

3. Contact for further information: (see also below)

Name Stephen Leeds

Title Program Analyst, Bureau of Program Policy, HCFA

Street 6325 Security Blvd.

City Baltimore State MD Zip Code 21235

Telephone (301) 594-8569

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
b. FY 1983
c. FY 1984
d. Other
(describe)

Also: William Hiscock
Act. Dir., Child Health Staff, Bureau of Program Operations
6300 Security Blvd.
Baltimore, MD 21235
301-594-4213

6. Target Group

___X___ a. Primary Grade Students
___X___ b. Secondary Students
_______ c. College Students
_______ d. Faculty and staff

_______ e. Environmental
___X___ f. Other Any Medicaid eligible person under 21
(describe)

7. Brief description

The EPSDT program of Medicaid provides outreach and periodic health screenings to Medicaid eligibles under 21, along with follow-up care, needed transportation, and case management. The program is unique within Medicaid because of its preventive and outreach features. Services are provided through private or group providers, public health programs, Head Start, some education agencies, and related programs.

A Guide for Educational Programs is available from this office.

DEPARTMENT OF THE INTERIOR

Information to be supplied later.

DEPARTMENT OF JUSTICE

Information to be supplied later.

DEPARTMENT OF STATE

Information to be supplied later.

DEPARTMENT OF TRANSPORTATION

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Agency National Highway Traffic Safety Administration, Department of Transportation

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

A. GENERAL.

1. Origin and Missions.

a. Origin. The National Highway Traffic Safety Administration is a composite of two separate agencies established in the Department of Commerce pursuant to the National Highway Safety Act of 1966 and the National Traffic and Motor Vehicle Safety Act of 1966. Pursuant to section 6(a) of the DOT Act, these two agencies were transferred to the Department of Transportation on April 1, 1967, and were merged into a single National Highway Safety Bureau to carry out the provisions of both acts by Executive Order 11357 of June 6, 1967. By administrative action of the Secretary of Transportation, the Bureau was placed within the Federal Highway Administration. Effective March 20, 1970, the Secretary separated the Bureau from the Federal Highway Administration and established the Bureau as one of the operating administrations of the Department reporting directly to him (Revision to Part 1, "Regulations of the Office of the Secretary of Transportation," and Change 28 to DOT 1100.23, "Department of Transportation Organization Manual," both dated March 18, 1970 and effective March 22, 1970). This reorganization was affirmed with the establishment of the National Highway Traffic Safety Administration as an operating administration in the Department of Transportation by the Highway Safety Act 1970 (P.L. 91-605).

b. Missions. The primary mission of the National Highway Traffic Safety Administration is to support the National goals and statutory responsibilities of the Secretary of Transportation with respect to the development and administration of programs that implement legislation designed to reduce automotive fuel consumption and motor vehicle crashes with resulting deaths, injuries, and economic losses, and to safeguard the motor vehicle consuming public through regulation, research, information, and education. In furtherance of this primary mission, additional missions of the National Highway Traffic Safety Administration are:

(1) The administration of a coordinated national program of leadership to the States and other public and private sector groups to accelerate highway safety programs, and the administration of programs of technical and financial assistance at the State and local levels.

(2) The promulgation of uniform standards for developing State highway safety programs in accordance with delegated responsibilities.

(3) The conduct of an evaluation program to assist States and local communities in the achievement of comprehensive highway safety programs.

(4) The establishment and enforcement of Federal Motor Vehicle Safety Performance Standards and the elimination of defects to improve safety in the operation and performance of motor vehicles and equipment.

(5) The establishment and enforcement of average fuel economy standards, the granting of adjustments and modifications, and attendant manufacturers penalties and credits.

(6) The conduct of a compliance testing program to assure compliance with Federal Motor Vehicle Safety Standards.

(7) The conduct of a consumer information program to advise the public with respect to the damage susceptibility, crashworthiness, ease of diagnosis and repair of passenger motor vehicles.

(8) The promulgation of rules for the disclosure of odometer mileage and prosecution of odometer fraud.

(9) The conduct of a research, development, and evaluation program necessary to advance the state-of-the-art in motor vehicle and highway safety, and to establish the base for standards development.

2. Special Relationships with the Federal Highway Administration.

a. NHTSA Assigned Responsibilities Under the:

(1) "National Traffic and Motor Vehicle Safety Act of 1966"

The NHTSA is responsible for administering all provisions of the National Traffic and Motor Vehicle Safety Act of 1966.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Highway Traffic Safety Administration
Department of Transportation
2. Project/Activity Title Alcohol Safety Education

3. Contact for further information:

Name LeRoy W. Dunn Ph.D

Title Educational Specialist

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City Washington State DC Zip Code 20590

Telephone (202) 426-0837

4. Category

x a. Health Education (Information, Curriculum etc.)
b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
d. Coordination

5. Anticipated years of operation

x a. Ongoing
b. FY 1983
c. FY 1984
d. Other ______
(describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
x c. College Students
x d. Faculty and staff
___ e. Environmental
___ f. General Public
___ g. Parents
___ h. Other ________ (describe)

7. Brief description

Since the early 1970's the National Highway Traffic Safety Administration (NHTSA) has been providing alcohol education materials for the nations' schools. In 1971, the Agency developed a K-12 alcohol curriculum titled Alcohol and Alcohol Safety. This six volume curriculum includes student activities and teacher's manuals. Over the past decade, this material has been used in schools in every state.

To augment the early alcohol materials, NHTSA developed in 1977 an alcohol education curriculum specifically for driver education programs. This program titled You ... Alcohol and Driving has Safety Education for use in driver education classes.

The materials were so well accepted that the American Automobile Association is using the materials in their educational programs for high school driver education classes.

In order to encourage and promote alcohol education in high school driver education programs in 1980 and 81, NHTSA conducted curriculum workshops for driving educators and others using NHTSA materials.

Currently, we are in the process of developing additional alcohol education materials for use in high schools programs. Steps also are being taken to develop a Youth Alcohol Program Plan for the states which will contain community projects and activities which youth can become envolved.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Highway Traffic Safety Administration
   Department of Transportation
2. Project/Activity Title Safety Restraints
3. Contact for further information:

   Name Michael F. Smith

   Title Research Psychologist, NRD-41

   Street 400 7th Street, S.W.

   City Washington, State D.C. Zip Code 20590

   Telephone (202) 426-4892

4. Category

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   ☐ b. Health Services (Immunizations, Screenings etc.)
   ☐ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
   ☒ d. Coordination

5. Anticipated years of operation

   ☒ a. Ongoing
   ☐ b. FY 1983
   ☐ c. FY 1984
   ☐ d. Other ____________ (describe)

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
X c. College Students
X d. Faculty and staff

e. Environmental
X f. General Public
X g. Parents
X h. Other Pre-school
(describe)

7. Brief description

NHTSA has been active for many years in the prevention and reduction of traffic accidents. Approximately 50,000 individuals were killed and 2.4M received disabling injuries from traffic accidents last year. Traffic accidents are the leading cause of death for youngsters and young people 1-24 years of age. The appropriate use of safety restraints and devices could reduce these figures by half. To reach the 1-24 age groups, the NHTSA is using numerous networks. This includes the schools, PTA, Traffic Safety Educational Associations, and community groups (e.g., Lions, hospitals, doctors, police, day care centers, etc.). We have or are developing educational materials (e.g., films, booklets) and curriculia for these networks. The school programs are both stand-alone and integrated with other subject areas. We are currently developing the requirements for a K-12 traffic safety curriculum with emphases on safety restraints, alcohol, pedestrian and bicyclist safety. The curriculum will use an integrated, interdisciplinary approach for presenting safety information and behavioral requirements. The curriculum also involves parents and "significant others" from the community and is being designed considering the developmental capabilities of youth.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency National Highway Traffic Safety Administration

2. Project/Activity Title Pedestrian and Bicyclist Safety

3. Contact for further information:

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Title Research Psychologist NRD-42

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Telephone (202) 426-2977

4. Category

X a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ______ (describe)

329

6. Target Group

_x_ a. Primary Grade Students
_x_ b. Secondary Students
___ c. College Students
___ d. Faculty and staff
___ e. Environmental
_x_ f. General Public
_x_ g. Parents
_x_ h. Other Pre-school
(describe)

7. Brief description

NHTSA has been active for many years in the prevention of road accidents occuring to both pedestrians and bicyclists. There are approximately 8000 pedestrian fatalities and 125,000 accidents annually. In many large cities, pedestrian deaths constitute 50% or more of the highway fatalities. Bicyclist/motor-vehicle accidents account for approximately 900-1,000 fatalities and a conservative estimate of 70,000 accidents yearly. The approach taken by the NHTSA has been to identify specific types of accidents comprising these totals, focusing on the behavioral errors and environmental factors which contribute most directly to the accident occurence. The next step was the development and test of countermeasures which act to reduce the incidence of specific accident types by breaking the chain of events leading to the accidents. The countermeasures take the form of training programs, public information and education materials, and traffic-safety regulations. At the state or local level, the program involves identification of specific problems using police accident reports, and the application of countermeasures for their solution.

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Agency U.S. Coast Guard, Department of Transportation

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

A. GENERAL

1. Origin and Missions.

a. The United States Coast Guard's historical development is based upon the integration of the Revenue Cutter Service, the Lifesaving Service, the Lighthouse Service, and the Bureau of Marine Inspection and Navigation. These Services and Bureaus were established as follows:

(1) The Revenue Cutter Service - August 4, 1790

(2) The Lifesaving Service - June 20, 1874

(3) The Lighthouse Service - August 7, 1789

(4) The Bureau of Marine Inspection and Navigation developed as follows:

(a) Steamboat Inspection Service - July 7, 1838
(b) Bureau of Navigation - July 5, 1884
(c) The Bureau of Navigation and the Steamboat Inspection Services were integrated to form the:
Bureau of Navigation and Steamboat Inspection - June 30, 1932
(d) The name was changed to:
Bureau of Marine Inspection and Navigation - May 27, 1936

b. The Coast Guard, as now constituted, developed as a result of the following actions:

(1) By the Act of January 28, 1915, the Revenue Cutter Service and the Lifesaving Service were merged to form the Coast Guard.

(2) By the Act of April 3, 1939, and in accordance with Reorganization Plan II of the President proposed thereunder, approved 9 May 1939, and effective 1 July 1939, the Lighthouse Service was integrated into the Coast Guard.

(3) By Executive Order No. 9083, approved and effective 27 February 1942, the Bureau of Marine Inspection and Navigation and its functions were transferred on a temporary basis to the Coast Guard; this transfer was subsequently made permanent by virtue of the Act of December 20, 1945, and in accordance with Reorganization Plan III of the President proposed thereunder, approved and effective 11 July 1946.

c. The missions of the United States Coast Guard are:

(1) Enforce or assist in the enforcement of all applicable Federal laws upon the high seas and waters subject to the jurisdiction of the United States.

(2) Administer laws and promulgate and enforce regulations for the promotion of safety of life and property on the high seas and on waters subject to the jurisdiction of the United States, covering all matters not specifically delegated by law to some other executive department or reserved to the States.

(3) Develop, establish, maintain, operate, and conduct, with due regard to the requirements of national defense, aids to maritime navigation; icebreaking facilities; oceanographic research; and rescue facilities for the promotion of safety on and over the high seas and waters subject to the jurisdiction of the United States.

(4) Maintain a state of readiness to function as a specialized service in the Navy in time of war.

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency United States Coast guard, Office of Boating, Public and Consumer Affairs.

2. Project/Activity Title Recreational Boating Safety

3. Contact for further information:

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Title Chief, Education Coordination Staff

Street U.S. Coast Guard (G-BBS-4)

City Washington State DC Zip Code 20593

Telephone (202) 472 2373

4. Category

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____ b. Health Services (Immunizations, Screenings etc.)
____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
XX d. Coordination

5. Anticipated years of operation

XX a. Ongoing
____ b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

333

6. Target Group

X a. Primary Grade Students
X b. Secondary Students
X c. College Students
X d. Faculty and staff

____ e. Environmental
X f. General Public
____ g. Parents
____ h. Other ____________ (describe)

7. Brief description

Boating and water safety programs have been developed and are in place as a permanent offering or as an activity program in a number of school systems nationwide.

The U.S Coast Guard Auxiliary, the largest provider of courses for youth, has one program aimed at the K - 4 age group. This program, "Water N'Kids" is presented to about 300,000 kids annually. The Auxiliary also has a course, "Young People's Boating Course", annually reaching about 200,000 4-8 graders, and a variety of courses for highschool students and adults.

The U.S. Coast Guard, in cooperation with the Universities of Tulsa and Houston developed boating/water safety curricula for the training of teachers, as well as for use in junior high schools, high schools, and colleges. These are hands-on, performance oriented courses and have proved very popular. So much that teachers are using them as disciplinary tools, "If you don't behave, you don't take a boating course". These courses have become permanent offerings in a number of schools and are also used by some state boating authorities.

Workshops and lectures are also provided in boating and water safety, with topics ranging from legal requirements to hypothermia, and first aid for near drowning victims to various professional groups such as safety engineers and emergency medical technicians.

A number of 16MM films, 35MM slide shows, and pamphlets have been produced and are available for inclusion in health, safety and recreational programs.

ENVIRONMENTAL PROTECTION AGENCY

Information to be supplied later.

ACTION

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency ACTION

2. Project/Activity Title Drug Prevention Program

3. Contact for further information:

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Title ACTION's Drug Prevention Program

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City Washington State D.C. Zip Code 20525

Telephone (202) 254-8501

4. Category

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____ b. Health Services (immunizations, screenings, etc.)
____ c. Health School Environment (asbestos abatement, safe environment, etc.)
____ d. Coordination

5. Anticipated years of operation

x a. Ongoing
x b. FY 1983
____ c. FY 1984
____ d. Other ____________ (describe)

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
____ c. College Students
x d. Faculty and Staff
____ e. Environmental
x f. General Public
x g. Parents
x h. Other

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

While ACTION is not directly involved in health education or promotion per se, many of the volunteers supported by our agency are. Currently, ACTION is focusing attention on the problems and needs of the young person confronted by a drug-promoting society and their parents, most of whom are caught unaware. It is our hope that the volunteer movement working to end adolescent drug abuse will flourish and will make a real difference in the lives of young people leading toward a healthier generation.

7. Brief description

ACTION's Drug Prevention Program

The major thrust of ACTION's Drug Prevention Program is to support volunteers who are working to end adolescent drug abuse. Most of these volunteers are parents involved in community awareness, networking and support groups. A majority are actively involved in their children's schools, chiefly through promoting comprehensive curricula and policies dealing with drug awareness and overall health education.

ACTION is currently awarding one year, limited grants to organizations in individual states to promote networking and coalition building among parent group leaders, health professionals, civic club leaders, business leaders and others. ACTION hopes to have fifteen to twenty state grants awarded during FY 1983 and twenty more the following year.

Another major activity of ACTION's Drug Prevention Program is the partial funding of state and regional conferences dealing with adolescent substance abuse and how all segments of a community might act to solve the problem.

Additionally, ACTION has underwritten the production of several materials through the American Council on Marijuana which discuss the health effects of various drugs and will soon have a brochure for adults concerning working with young people to promote alternatives, peer support, etc... Similarly, as a result of the White House Briefing on Drug Use and the Family (1982), which was sponsored by ACTION, the McNeil Pharmacuetical Company has worked with ACTION to fund a major program in New England entitled "Pharmacists Against Drug Abuse." This program has as its components literature in pharmacies dealing with drugs and a training program for pharmacists so they can become resources for prevention of drug abuse in their community and especially their schools. This program is only a few months old and early results indicate that among the most enthusiastic recipients of the literature are teachers and that several pharmacists have already been invited into schools to do programs.

Other Programs

As a new initiative, drug prevention is becoming a major focus of established ACTION programs such as Young Volunteers in ACTION (YVA), Retired Senior Volunteer Program (RSVP), and Foster Grandparents. Whenever possible, these volunteers are stationed where they might be of assistance to the overall movement away from drugs. YVA volunteers are able to become involved in health education, drug awareness, alternatives and peer support programs. RSVP volunteers offer counseling to young people in crisis, can help in treatment centers, form speakers bureaus and various other activities. Foster Grandparents offer direct counseling to individual young people in the hope of adding meaning and sense to their lives and thus avoiding damaging lifestyles.

INTERAGENCY MEETING ON HEALTH PROMOTION THROUGH THE SCHOOLS

Auditorium
Hubert H. Humphrey Building
Washington, D.C.

March 24-25, 1983

GOAL: The sharing of information to encourage effective utilization of existing Federal activity; prevention of duplication of effort and increased cooperative planning in health promotion through the schools.

OBJECTIVES:

1. To collect and share information regarding Federal programs designed to promote good health practices among youth (health education, school health services, and healthy school environment).
2. To encourage coordination of activities in school health promotion.
3. To make recommendations for future directions in health promotion activities in schools.

ANTICIPATED PRODUCT: Document summarizing the proceedings and recommendations of the meeting.

INTERAGENCY MEETING ON HEALTH PROMOTION THROUGH THE SCHOOLS

Auditorium
Hubert H. Humphrey Building
Washington, D.C.

March 24-25, 1983

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Prevention Branch
National Institute on Drug Abuse
Alcohol, Drug Abuse, and Mental Health Administration
Department of Health and Human Services

Sam Taylor
Office of Family Planning
Office of the Assistant Secretary for Health
Department of Health and Human Services

Anne Thomas
Division of Publice Information
Office of the Director
National Institutes of Health
Department of Health and Human Services

Dennis D. Tolsma
Center for Health Promotion and Education
Centers for Disease Control
Department of Health and Human Services

Jeanne Trumble
Secretary's Initiative on Teenage Alcohol Abuse
National Institute on Alcohol Abuse and Alcoholism
Alcohol, Drug Abuse, and Mental Health Administration
Department of Health and Human Services

Cherry Tsutsumida
Division of Medicine
Bureau of Health Professions
Health Resources and Services Administration
Public Health Service
Department of Health and Human Services

Carol Vetter
Office of Medical Devices
Food and Drug Administration
Department of Health and Human Services

Diane Vines
Office of the Under Secretary
Department of Education

Sidney Wolverton
Alcohol, Drug Abuse and Mental Health Administration
Department of Health and Human Services

Donald Young, M.D.
Bureau of Eligibility, Reimbursement, and Coverage
Health Care Financing Administration
Department of Health and Human Services

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by March 3, 1983.

Agency HHS/HDS/Head Start Bureau

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The general objectives of the health services component of the Head Start program are to:

(a) Provide a comprehensive health services program which includes a broad range of medical, dental, mental health and nutrition services to preschool children, including handicapped children, to assist the child's physical, emotional, cognitive and social development toward the overall goal of social competence.

(b) Promote preventive health services and early intervention.

(c) Provide the child's family with the necessary skills and insight and otherwise attempt to link the family to an ongoing health care system to ensure that the child continues to receive comprehensive health care even after leaving the Head Start program.

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(202) 472-5308

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HHS - Human Development Service

2. Project/Activity Title Head Start Bureau
Medical Services

3. Contact for further information:

Name Phyllis E. Stubbs, M.D.

Title Director, Head Start Health Services

Street Donohoe Building - 400 6th Street S.W.

City Washington State D.C. Zip Code 20013

Telephone (202) 755-7944

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

_____a. Primary Grade Students
_____b. Secondary Students
_____c. College Students
__X__d. Faculty and staff

_____e. Environmental
_____f. General Public
__X__g. Parents
__X__h. Other Preschool aged
(describe)
children

7. Brief description

The medical services component of Head Start provides that for each child enrolled in the Head Start program, a complete medical, and developmental history will be obtained and recorded, a through health screening will be given, and medical examinations will be performed. Health screenings included growth assessment, vision testing, hearing testing hemoglobin or hematocrit determination, tuberculin testing (where indicated), urinalysis, assessment of immunization status, identification of speech problems and other selected screenings where appropriate to a particular community, and the identification of the special needs of handicapped children. Each child in the program receives a medical examination and updated immunization as needed and the Head Start program obtains or arranges for treatment of all health problems detected.

An organized health education program for Head Start staff, parents and children provides the opportunity for learning the principles of preventive health, emergency first aid measures, and safety practices.

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FORM 3

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HHS - HDS

2. Project/Activity Title Head Start Bureau
Dental Health Services

3. Contact for further information:

Name Marion Slatin
Title Child Health Specialist
Street Donohoe Building - 400 6th Street, S.W.
City Washington State D.C. Zip Code 20013
Telephone (202) 755-7944

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
d. Coordination

5. Anticipated years of operation

X a. Ongoing
b. FY 1983
c. FY 1984
d. Other ______ (describe)

6. Target Group

_____ a. Primary Grade Students
_____ b. Secondary Students
_____ c. College Students
__X__ d. Faculty and staff
_____ e. Environmental
_____ f. General Public
__X__ g. Parents
_____ h. Other Preschool aged
(describe)
Children

7. Brief description

The objectives of Head Start Dental component are to ensure that each enrolled Head Start child and family receive dental services as outlined in the Performance Standards which include comprehensive preventive and treatment care, i.e. self care oral hygiene procedures, topical or supplemental fluoride application, dental examinations, prophylaxis and when necessary, follow-up and treatment services required for relief of pain or infection, restoration of decayed teeth, pulp therapy and extraction of non-restorable teeth; and in addition, health education is provided for parents, children and staff including information for parents on available community dental health resources.

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Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency HHS - HDS

2. Project/Activity Title Head Start Bureau
Mental Health Services

3. Contact for further information:

Name Phyllis E. Stubbs, M.D.

Title Director, Head Start Health Services

Street Donohoe Building - 400 6th Street, S.W.

City Washington State D.C. Zip Code 20013

Telephone (202) 755-7944

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other __________ (describe)

6. Target Group

____ a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
__X__ d. Faculty and staff

____ e. Environmental
____ f. General Public
__X__ g. Parents
__X__ h. Other Preschool aged children (describe)

7. Brief description

The six specific objectives in Head Start's mental health component are as follows:

1. Assist all children participating in the program in emotional, cognitive and social development toward the overall goal of social competence in coordination with the education program and other related component activities;

2. provide handicapped children and children with special needs with the necessary mental health services which will ensure that the child and family achieve the full benefits of participation in the program;

3. provide staff and parents with an understanding of child growth and development, an appreciation of individual differences, and the need for a supportive environment;

4. provide for prevention, early identification and early intervention in problems that interfere with a child's development;

5. develop a positive attitude toward mental health services and a recognition of the contribution of psychology, medicine, social services, education and other disciplines to the mental health program; and

6. mobilize community resources to serve children with problems that prevent them from coping with their environment.

These objectives call upon the mental health component to provide services, to provide training and to be advocates for the development of social competency in each Head Start child.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Human Development Services –

2. Project/Activity Title Head Start Bureau / Nutrition [illegible]

3. Contact for further information:

Name Dr.Margaret G.Phillips Ed.D., R.D.

Title Nutritionist

Street P.O Box 1182, Wash.

City Wash. LD.C. State 20013 Zip Code ______

Telephone (202) 755-7944

4. Category

__x__ a. Health Education (Information, Curriculum etc.)
_____ b. Health Services (Immunizations, Screenings etc.)
_____ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
_____ d. Coordination

5. Anticipated years of operation

__x__ a. Ongoing
_____ b. FY 1983
_____ c. FY 1984
_____ d. Other ______________ (describe)

6. Target Group

x **Preschool Children**

_____a. Primary Grade Students
_____b. Secondary Students
_____c. College Students
_____d. Faculty and staff
_____e. Environmental
_____f. General Public
_____g. Parents
_____h. Other _____________ (describe)

7. Brief description

The objectives of nutrition services

Help provide food which will help meet the child's daily nutritional needs in the child's home or in another clean and pleasant environment recognizing individual differences and cultural patterns and thereby promote sound physical, social, and emotional growth and development.

Provide an environment for nutritional services which will support and promote the use of the feeding situation as an opportunity for learning.

Help staff, child and family to understand the relationship of nutrition to health, factors which influence food practices, variety of ways to provid for nutritional needs and to apply this knowledge in the development of sound food habits even after leaving the Head Start Program.

Demonstrate the interrelationships of nutrition to other activities of the Head Start Program and its contribution to the overall child development goals.

Involve all staff, parents and other community agencies as appropriate in meeting the child's nutritional needs so that nutritional care provided by Head Start complements and supplements that of the home and community.

The nutrition services must identify the nutritional needs and problems of the children in the Head Start program and their families and arrange for follow-up services.

Nutrition and Health Promotion Initiative

The Nutrition Services has launched a nutrition and health promotion initiative which will involve selected Head Start programs in conjunction with the Extension Service, USDA for the purpose of intervening early in prevention of obesity and heart disease.

FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by March 8, 1983.

Agency Department of Defense Dependents Schools

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

Curriculum emphasis in health education in the Department of Defense Dependents Schools is stated by the program objectives. The objectives are accomplished in accordance with procedures established in the Five-Year Curriculum Development Plan.

Comprehensive school health education commands a high position among educational priorities because effective school health programs have the potential of enhancing the quality of life, raising the level of health awareness, and favorably influencing the learning process. The health education program is defined to include mental health, family life and human development, safety and accident prevention, nutrition, consumer health, positive health practices, substance use and abuse, environmental health, and career opportunities. Traditionally, we have assumed that health problems could be alleviated with more accurate information. Knowledge is important, and learning about health is a dynamic process, but maintaining health requires an understanding of the body's potential for health, the ability to control potential threats to health, and a lifestyle that cultivates behaviors directed toward optimal health.

Health services in the school center around the school nurse, the preventive health program, and the school environment. The multi-faceted program managed by the nurse includes student screening, record-keeping, health referrals, parental contact, teacher resource, military medical liaison, and health information sources. Other responsibilities include involvement with the child study committees, drug use and abuse committees, and preventive health instruction for youngsters concerning proper health care and procedures in an emergency situation.

Through a united effort in prevention and health education, students in the Department of Defense Dependents Schools will continue to develop higher "quality of life" goals for their personal life.

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FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Defense

2. Project/Activity Title Department of Defense Dependents Schools

3. Contact for further information:

Name JanaLee Sponberg

Title Education Specialist, Health

Street 2461 Eisenhower Avenue, Room 172

City Alexandria State Virginia Zip Code 22331

Telephone (202) 325-0867/0868/0869

4. Category

X a. Health Education (Information, Curriculum etc.)
x b. Health Services (Immunizations, Screenings etc.)
X c. Health School Environment (Asbestos Abatement, Safe environment etc.)
X d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ___________ (describe)

6. Target Group

_X_ a. Primary Grade Students
_X_ b. Secondary Students
___ c. College Students
_X_ d. Faculty and staff

___ e. Environmental
___ f. General Public
___ g. Parents
___ h. Other __________ (describe)

7. Brief description

See description on form A.

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FORM C

Information Requested for the "Interagency Meeting On Health Promotion Through the Schools"

Please return by March 8, 1983.

Department/Agency Department of Defense Dependents Schools

Please attach a list of attendees for the meeting.

Include name, title, and address.

JanaLee Sponberg
Education Specialist, Health
DoD Dependents Schools, Hoffman I
2461 Eisenhower Avenue, Room 172
Alexandria, Virginia 22331

Return to Dr. Glen G. Gilbert
Office of Disease Prevention
and Health Promotion
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FORM A

Information requested for "Interagency Meeting on Health Promotion Through the Schools," Please return by March 3, 1983.

Agency Department of State - Office of Overseas, A/OS

Please provide a brief statement regarding your mission in School Health Promotion (School Health Education, School Health Services and Healthy School Environment). Attach your legal mandate if pertinent.

The Office of Overseas of the U.S. Department of State has two long-term goals which are:

1. To promote quality educational opportunities at the elementary and secondary school level for dependents of American citizens carrying out programs and interests of the U.S. Government abroad.

2. To increase mutual understanding between the people of the United States and the people of other countries by upgrading educational institutions which serve to demonstrate American educational ideals as well as educational principles and methods employed in the United States.

In attempting to meet these goals in 160 American-sponsored schools overseas, school health promotion is a natural component.

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FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U. S. Department of State, Office of Overseas Schools
2. Project/Activity Title ____________________
3. Contact for further information:

Name Dr. Vincent McGugan
Title Regional Education Officer
Street U.S. Department of State
City Washington, State D.C. Zip Code 20520
Telephone (703) 235-1760

4. Category

x a. Health Education (Information, Curriculum etc.)
___ b. Health Services (Immunizations, Screenings etc.)
x c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

x a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ____________________ (describe)

FORM C

Information Requested for the "Interagency Meeting On Health Promotion Through the Schools"

Please return by March 8, 1983.

Department/Agency **Department of State**

Please attach a list of attendees for the meeting.

Include name, title, and address.

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The Reporters Building
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Washington, D.C. 20201
(202) 472-5308

6. Target Group

x a. Primary Grade Students
x b. Secondary Students
___ c. College Students
___ d. Faculty and staff
___ e. Environmental
___ f. General Public
___ g. Parents
___ h. Other ______________
(describe)

7. Brief description

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(202) 472-5308

INTERAGENCY MEETING ON HEALTH PROMOTION THROUGH THE SCHOOLS

Inventory of Federal School Health Promotion Activities

Working Document

ADDENDUM

Cosponsored by the
U.S. Department of Health and Human Services
and the
U.S. Department of Education

Coordinated by the Office of Disease Prevention and Health Promotion

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Defense (DoD)

2. Project/Activity Title National Health Fair Program (NHFP), Private Sector Initiatives (PSI) Program

3. Contact for further information:

Name Captain Dennis J. Hickey, IV, USNR (Health Fairs)

Title Military Liaison Officer and Project Manager

Street Office of Economic Adjustment (OEA), Rm 3E-772, Pentagon

City Washington State D.C. Zip Code 20301

Telephone (202) 694-4657

Mr. Roger S. Sattler, Assistant Director, OEA(PSI), (202)695-1800

4. Category

x a. Health Education (Information, Curriculum etc.)
x b. Health Services (Immunizations, Screenings etc.)
c. Health School Environment (Asbestos Abatement, Safe environment etc.)
x d. Coordination

5. Anticipated years of operation

x a. Ongoing
b. FY 1983
c. FY 1984
d. Other ________
(describe)

6. Target Group

____ a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
____ d. Faculty and staff

____ e. Environmental
X f. General Public
____ g. Parents
X h. Other DoD Personnel, dependents & retirees (describe)

7. Brief description: Background

At a White House ceremony on August 5, 1982, President Reagan cited the National Health Screening Council for Volunteer Organizations (NHSCVO) role in facilitating the development of cost effective local programs built on community partnerships. U.S. Government agencies were encouraged to join the national effort. These partnerships are expected to encourage continued efforts on the part of federal agencies to identify ways to provide service to the community without increasing government spending. In October, 1983, the President's Task Force on Private Sector Initiatives (PSI) requested the Department of Defense to support the 1983 National Health Fair Program (NHFP) sponsored by NHSCVO. The Defense Department endorsed the NHFP on November 9, 1983 and encouraged expanded support and volunteer activity by the military departments. The NHFP is a cooperative effort of media, business, public and non-profit organizations assisting communities in health education, screening and referral activities.

The Defense Department action office for the PSI Program and NHFP is the Office of Economic Adjustment under the Assistant Secretary of Defense (Manpower, Reserve Affairs and Logistics). The Department's NHFP promotion efforts are being coordinated with the Office of the Assistant Secretary of Defense for Health Affairs.

HEALTH FAIR (NHSCVO MODEL)

- Promotes health awareness and self-assessment though activities, demonstrations, information

- Encourages participants to assume responsibility for health choices

- Provides free screening to promote health and prevent disease at one convenient time and place

- Detects potential disease at an early treatable stage
- Reinforces need for continued adherence to prescribed treatments
- Refers participants to health care source for re-evaluation if necessary
- Reassures and encourages participants to continue good health behaviors
- Promotes effective use of community resources by encouraging cooperation among private, voluntary, and government sectors

MODEL COMPONENTS

HEALTH EDUCATION: NHSCVO Learning Centers for Health are directed at motivating participants to become actively involved in learning more about health and how their lifestyle choices relate to health. A Learning Center Manual is available with Learning Center ideas on ten topics:

Using Medications Wisely
Nutrition
Mental Health
Exercise and Fitness
Safety
Habits
Consumer Health
Environmental Health
Family Health
Community Health Resources

Three booklets comprise a series which address health education needs of minorities. Where? Regional Profile of Minorities, What? Outline of Minority Health Needs, and How? Addressing Minority Health Needs are available upon request.

Education also takes place at each screening station where trained volunteers provide basic information to participants. A major media sponsor (television, radio or newspaper) provides saturation promotion, news coverage, and health education programming to increase health awareness and participation in Health Fair Week Programs.

SCREENING TESTS: Basic health screenings which DO NOT replace an examination by a physician include:

Height & Weight
Blood Pressure
Anemia
Visual Acuity
Optional Blood Chemistry Analysis (20-25 test panel)

Additional screenings such as hearing, glaucoma, oral screening, colon rectal, breast exam, Sickle Cell, Tay-Sachs, podiatry, and lead screening can be added depending on local resources, interests, and needs. Screenings are FREE except for blood chemistry analysis where participants are asked to donate a small amount of defray costs.

SUMMARY AND REFERRAL: Volunteer health professionals provide individual counseling, information, and referrals. This provides an opportunity for review of test results and health history, attention to potential risk areas, assistance with referrals, determination of personal health goals, and answers to questions (additional health education).

FOLLOW-UP:

Part 1: All participants receive copies of test results in the mail within six weeks after the fair. This serves as a reminder of the event and additional motivation to continue lifestyle changes or pursue follow-up as recommended (if not already done).

Part II: Participants with significant abnormalities receive a phone call to determine if follow-up was pursued or if additional assistance for referral is needed.

NHSCVO

NHSCVO, Inc., is a private, non-profit organization which exists to help communities who wish to provide comprehensive, low-cost Health Fairs to promote health and prevent disease. Founded in 1975, NHSCVO has helped sponsors throughout the United States, Puerto Rico, and the Virgin Islands, and offered health screening and education services to more than one million participants.

The home office is located in Bethesda, MD, with branch offices (Health Fair Week Program) in growing numbers of cities and rural areas.

FORM B

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by March 8, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency Department of Defense (DoD)

2. Project/Activity Title Student Health Fair Program (SHFP), Private Sector Initiatives (PSI)

3. Contact for further information:

Name Captain Dennis J. Hickey, IV, USNR, (Student Health Fairs)

Title Military Liaison Officer and Project Manager

Street Office of Economic Adjustment, Rm. 3E-772, Pentagon

City Washington State D.C. Zip Code 20301

Telephone (202) 694-4657

Mr. Roger S. Sattler, Assistant Director, OEA(PSI), (202)695-1800

4. Category

x a. Health Education (Information, Curriculum etc.)
x b. Health Services (Immunizations, Screenings etc.)
__ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
x d. Coordination

5. Anticipated years of operation

__ a. Ongoing
x b. FY 1983
x c. FY 1984
__ d. Other ________ (describe)

6. Target Group

____ a. Primary Grade Students
X b. Secondary Students
____ c. College Students
____ d. Faculty and staff
____ e. Environmental
____ f. General Public
____ g. Parents
X h. Other DoD Dependents
(describe)

7. Brief description: Background

The Student Health Fair Program (SHFP) is a component program of the National Health Fair Program (NHFP) sponsored by the National Health Screening Council for Volunteer Organizations (NHSCVO). After review of the NHFP and the SHFP by the Private Sector Initiatives (PSI) Program Manager, Office of Economic Adjustment (OEA) acting for the Assistant Secretary of Defense (Manpower, Reserve Affairs and Logistics), the SHFP was referred to the Director, DoD Deppendent Schools for review and possible use in their Health Education Program. This referral was made in coordination with the Assistant Secretary of Defense (Health Affairs). For additional background on the NHFP, NHSCVO model, and model components refer to the separate NHFP (Form B) project discussion.

Student Health Fair Program--Designed for use in junior and senior high schools, the Student Health Fair Program involves students in planning and directing their own Health Fairs. This program demonstrates the interest and ability of students to identify and meet health needs, with adult guidance. The Student Health Fair is like a science fair with a health theme. Students learn new skills in performing screening tests and developing educational activities, exhibits and materials for their peers.

The Health Fair model is designed to expand in many directions to meet the needs of individual schools, with local determination of the number and nature of topics and screenings. It can become the basis for a health education program, may promote existing classes, or may be an annual event to increase interest and knowledge about health and health careers.

The Student Health Fair helps:

- To combat myths and misperceptions
- To link students and teachers with available services and organizations

- To prevent disease

- To generate interest and knowledge in health science and health careers

- To accomplish recommended or required screening tests

- To make health education an active, stimulating experience, relevant and appropriate to the needs and interests of students.

The Student Health Fair provides:

- means to develop and use peer resources

- A needed service planned and provided for students by students

- A bridge between learning and doing

- An efficient coordination of school and community resources

- Involvement in self assessment and motivation to exercise healthy decision making

A grant from Atlantic Richfield Foundation makes it possible for the National Health Screening Council to pilot Student Health Fairs across the country, insuring that any school wishing to participate can. NHSCVO assists local sponsors to expand the event to an annual, district-wide program after the first year pilot.

In 1982, more than 100 Student Health Fairs took place across the United States, including the first school district-wide program sponsored in Denver by the Gannett Foundation and KBTV 9, and the first multiple school district in St. Louis, sponsored by KWK FM, Vess Limited, Schnucks Markets, and the American Red Cross. Efforts in 1983 will focus on expansion of pilot programs, statewide projects, improved health education activities and film, and adaptations for elementary schools.

NHSCVO is a private, non-profit organization which exists to help in planning and implementing low cost, high quality comprehensive health fairs in order to promote health and prevent disease. The NHSCVO address is:

National Health Screening Council for Volunteer
Organizations, Inc.
5161 River Road, Building 2
Bethesda, MD 20816
(301) 657-8480

Information requested for "Interagency Meeting on Health Promotion Through the Schools." Please return by February 15, 1983.

Please type or print - reproduce these forms as many times as necessary

1. Agency U.S. Department of Education

2. Project/Activity Title A Handbook for Designing, Implementing, and Monitoring Non-Instructional Programs

3. Contact for further information:

Name Rhonda Lewis

Title Program Analyst

Street 400 Maryland Avenue, SW, Room 4036

City Washington, State D.C. Zip Code 20202

Telephone (202) 245-9401

4. Category

X a. Health Education (Information, Curriculum etc.)
X b. Health Services (Immunizations, Screenings etc.)
___ c. Health School Environment (Asbestos Abatement, Safe environment etc.)
___ d. Coordination

5. Anticipated years of operation

X a. Ongoing
___ b. FY 1983
___ c. FY 1984
___ d. Other ________ (describe)

6. Target Group

X a. Primary Grade Students
____ b. Secondary Students
____ c. College Students
X d. Faculty and staff
____ e. Environmental
____ f. Other ____________ (describe)

7. Brief description

A handbook is being developed by the National Urban League to assist educators or service providers who are responsible for developing, implementing, and monitoring comprehensive health service programs.

The handbook will be based on information collected from the Follow Through program in New York City, as well as from other relevant data sources. The handbook will contain narrative explanations of each principle--development, implementation, and monitoring of a health delivery system. In addition, it will provide anecdotal descriptions & successful strategies, planning forms, work sheets, checklists, flowcharts, and pertinent resources.

Return to Dr. Glen G. Gilbert
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INTERAGENCY MEETING ON HEALTH PROMOTION THROUGH THE SCHOOLS

March 24 and 25, 1983

Evaluation

1. Do you feel that this meeting has increased your understanding of the Federal role in school health promotion?

   _____ Yes _____ No _____ Somewhat

   Comments:

2. Has this meeting provided you with at least one new contact for possible future coordination of activities? _____ Yes _____ No

   Comments:

3. How useful will the document on activity in health promotion through the schools (distributed the first day) be to you?

   _____ Very Useful _____ Useful _____ May be Useful _____ No Value

   Comments:

4. What activity (i.e., meetings, initiatives, etc.) would you suggest as a followup to this meeting?

(over)

5. What did we leave out? What questions went unanswered? What appropriate people were not invited, etc.?

6. What was the best feature of the meeting?

GENERAL COMMENTS:

Thank you for taking the time to fill out this evaluation!

(This evaluation form will be collected on Friday during the group meetings.)